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January 7, 1989



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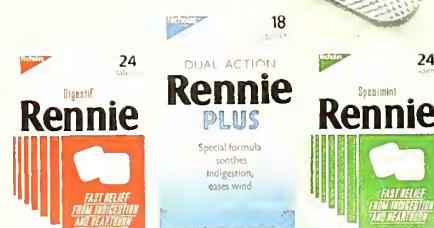
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# CHEMIST & DRUGGIST

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Production: Shirley Wilson  
Publisher: Ronald Salmon, FPS  
Director: Christopher  
Leonard-Morgan  
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Telex: 95132 Benton G  
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# COMMENT

**W**hen is a pharmacy not a pharmacy? When it is in a doctor's surgery in a residential area. Says who? Kenneth Clarke? No, the Secretary of State for the Environment, Nicholas Ridley.

In deciding the outcome of the planning inquiry of Mrs Shashi Gossain's pharmacy at 464 Great West Road, Hounslow, Mr Ridley held that it was an error to apply a meaning to words given in one statutory provision to the terms of another; it had to be interpreted in the context of the Act or statutory provision which contains it.

Those attending the inquiry hearing last August in the council chamber in Hounslow might have expected the result to hinge on the dictionary, as much of the first morning was lost in a circumlocutory debate on the definitions of "dispensary", "dispensing pharmacy" and "retail pharmacy".

That it should be Mr Ridley's dictionary that throws up such a confusion did not seem possible, especially since he has actually gone against the verdict of his own inspector who heard the debate. The floodgates surely now must be open for any pharmacist to raise with his local GP the subject of a spare room in the surgery for dispensing. Kent

FPC believes it is desirable for pharmacists to be closely associated with doctors (*C&D* December 10, p989). In its White Paper the Government looked to closer co-operation between the two professions. It is not difficult to see the attractiveness of such surgery pharmacy schemes to Mr Clarke and his Treasury henchmen who have just ditched the cost-plus contract.

Mrs Gossain's £100,000-plus turnover came from a room with just 60 sq ft of floor space. Think how that would appear in the now defunct cost and overheads inquiries. As for extra roles — with such "pharmacies" only really operating during surgery hours, the pharmacist will have plenty of time for domiciliary visiting.

With the Society powerless to prevent the registration of such quasi "retail pharmacy businesses", whatever that means — Mrs Gossain sold three over the counter items in 14 months — can anybody stop the march of *progress*? Surgery pharmacy businesses predominantly dispensing scripts originating from those premises, and making those critical few retail sales, do not require planning permission.

If PPSCs do not apply a brake it will be back to the drawing board on rational location and control of entry!



# PGC upset by 'southern' influence on Scottish negotiations

The Pharmaceutical General Council is to seek urgent talks with the Scottish Home & Health Department to ensure that future remuneration negotiations affecting Scottish contractors should not be directly influenced by any negotiations in England and Wales.

The PGC standing committee is insisting that separate fee negotiations for Scotland must continue following the surprise news that the SHHD had been instructed by Government to abandon the cost-plus contract (December 17/24, p1026).

The Committee also instructed officials to make a formal protest against the Government's allegation that "incentives to cost efficiency" in the current arrangements were limited since the last remuneration survey in 1984. The PGC says

that while such a description might be applicable elsewhere in the UK, there was irrefutable evidence it could not apply in Scotland where the system had never been abused.

Acting chairman, Graeme Millar claimed Scottish contractors, through no fault of their own, were being unfairly penalised by events in England and Wales following their remuneration survey. "This survey showed massive increases in costs, well above that expected from normal indexation. We must set up a basis of negotiation which does not subject us to the rubber stamp of decisions arrived at after negotiations between the DHSS and the Pharmaceutical Services Negotiating Committee".

The Committee says it has little option but to accept the imposition, but will strongly

contest the Government's intention of discontinuing remuneration surveys while retaining discount surveys. The Committee says: "If one survey goes then both go".

However, one bonus was that the Government would now pay for the whole of the Essential Pharmacy Scheme instead of meeting only one third. "But", stressed Mr Millar, "The primary care recommendations in the Government's White Paper cannot be negotiated separately and will not be subject to the requirements of making savings in the balance sheet as in the past."

"It is our responsibility to convince the Department that realistic increases in the level of fees should be made from year to year. This will require the PGC to gather substantial amounts of information from contractors."

## Proposed NHS changes

Revised boundaries affecting about 50 per cent of Family Practitioner Committees are expected to result from changes in the NHS to be announced later this month.

Proposals designed to achieve better value for money will dominate the White Paper outlining the conclusions reached by the Cabinet committee, presided over by the Prime Minister, which has now completed its review of the NHS begun almost a year ago. Improved provision for elderly patients is likely to be the main thrust of the proposals, with an expanded role for pharmacy.

The fundamental structure of the NHS will not be subjected to any far reaching changes in the short term although "gateways" are to be established to look for links with the private sector.

Initially this could mean some hospitals opting out of control by district health authorities, being allowed to administer their own budget and permitting their facilities to be used more for private practice.

## New rural deal sought

A renegotiation of the Clothier agreement, an end to "umbrella" discounting for parallel imports and additional payments for inner city pharmacies will be called for by delegates to the Local Pharmaceutical Committee conference on February 21.

Devon LPC believes that, in view of current difficulties, a renegotiation of the Clothier Regulations and agreements should start immediately. Gateshead LPC believes the Pharmaceutical Services Negotiating Committee should press the Department of Health to end the present umbrella discounting for parallel imports, while the motion seeking additional weighting for inner city pharmacies comes from City and East London LPC, which feels these payments are needed to maintain a reasonable service.

Because of the flaws coming to light in the new contract Regulations, Rochdale FPC wants a fighting fund set up to establish the correct legal interpretation of the Regulations.

Barnet LPC is to ask PSNC to pursue the provision of a second pharmacist allowance, not funded by global sum redistribution.

## On-call or rota choice

A new model hours of service scheme, to be put to the LPC conference on February 21, proposes a voluntary 24 hour on call arrangement as a possible alternative to the rota scheme.

PSNC believes this would pave the way for a well-remunerated 24 hour on-call service.

Several changes to the PSNC and LPC constitutions, including payments to LPC secretaries, will also be discussed at the meeting. The revisions were suggested by a PSNC working party.

The proposed model hours of service scheme states the minimum hours of business in total hours per week — 35 between 9am and 5.30pm — rather than specific hours of opening, which the PSNC believes could be "somewhat limiting."

The variation of minimum hours of service arrangements in the current scheme still stand.

In the proposed 24 hour emergency scheme, one or more contractors would be on standby in rotation to urgent prescriptions.

The Family Practitioner Committee might then make the arrangements part of the contractors' terms of service, after consulting the LPC to ensure all contractors were given a chance to participate and making suitable financial arrangements.

This alternative scheme would take the place of a rota only where the pharmacists wished. PSNC believes it would be reasonable for the rota fees to be used as a standby allowance for the pharmacist on call, who would also receive urgent fees for prescriptions dispensed.

In amending the constitutions, the working party has changed the definition of pharmacy contractor to mean a person or body corporate operating one or more registered pharmacies supplying NHS pharmaceutical services. This would allow a pharmacy owner or director of a limited company to be a member of PSNC but not someone with only a financial interest such as a shareholding.

The working party considered whether the PSNC was too large, but decided that to reduce substantially the size would make it unrepresentative. It was also decided after much discussion not to change composition. A clause

allowing observers to be invited from other pharmaceutical bodies has been added.

The draft LPC constitution therefore provides that the secretary may be, but need not be, a member of the LPC and that the LPC should pay "appropriate" remuneration and expenses. Expenses of other committee members should also be reimbursed.

The working party has also proposed changes to the method of election of LPC members. Electors must be "persons lawfully conducting retail pharmacy businesses." There would be separate elections for pharmacy contractor representatives and for pharmacists employed by contractors, and arrangements made to prevent a pharmacist seeking election both as an employee and also as a nominated representative of the CCA and Co-operative Societies.

If approved by the February conference, the revised LPC constitution and model hours of service scheme would need approval from the Department of Health, while each clause of the PSNC constitution would need approval by a two-thirds majority of PSNC.



## PSNI appoints two Fellows

The Pharmaceutical Society of Northern Ireland has designated Noel Weldon Bell and Derek Corbett Fellows of the Society for services to the profession.

Mr Bell, who registered with the Society in 1957, is a proprietor pharmacist in Fintona, co Tyrone. He was a founder member of the Fermanagh and West Tyrone Chemists Association. He is an active member of the Pharmaceutical Contractors Committee and the Western Board Area Pharmaceutical Advisory Committee.

Mr Corbett, who registered in 1959, is a past-president both of the Society and of the Ulster Chemists Association. He is a proprietor in Bangor, co Down.

Mr John D. G. O'Hare was co-opted to the Council at its December meeting, following the resignation of Dr Anderson.

Mr Joshua Kerr and Dr M. G. Scott have been appointed to the Course Advisory Committee of the BTEC Course in Pharmaceutical Sciences.

Mr Richard Needham, MP, had written explaining the composition of the Health Promotion Committee and why he does not wish to expand it with pharmaceutical and other representatives.

A letter has been received from the DHSS discussing the need for a unique common identifier for patients and clients as a means for efficient records linkage in the Health & Personal Social Services. A formal response has been requested.

Professor D'Arcy's term of office as a member of the Medicines Commission is due to expire at the end of 1989. The Council agreed to propose his reappointment for a further term.

The Public Records Office is offering prescription books from Grattan's Chemists covering the years 1827-1955. The Council will take a selective sample but members of the Society might like books from a particular year. These interested should inform the secretary.

An application for recognition as a pre-registration tutor by Mr V.O. Mawhinney, 23 North Street, Lurgan, was granted.

It is intended to hold two Presidents At-Home next month. On February 1 Professor P.F. D'Arcy will speak on "Alternative medicines — are they alternative?" and on February 8 Mr H. McFarland will talk on "The Misuse of Drugs."



"These are very easy to open, Madam..."

## 'Private' pharmacy for Harrogate Safeway superstore

Safeway are to continue to operate a pharmacy within their Harrogate store despite being removed from the pharmaceutical list last month.

Their decision will mean that while normal day-to-day advice can still be given by qualified staff for over-the-counter medicines, and private prescriptions can continue to be dispensed, the department will be unable to

dispense NHS prescriptions. "The pharmacy is being deleted from the list because of a string of unfortunate events which arose as a direct result of changes in DHSS legislation last year," said superintendent pharmacist Richard King (C&D October 29).

In October North Yorkshire Family Practitioner Committee was ordered by the High Court to reconsider its decision to allow

Safeway to operate a pharmacy in the new Harrogate superstore. The FPC did this, and while accepting that it had discretion to allow Safeway to remain on the pharmaceutical list, did not do so.

Safeway say they are still reviewing the position with the FPC and will take all possible steps to re-commence the supply of full pharmaceutical services to the public as soon as possible.

## 'Subterfuge' breaches code

A Lundbeck representative has breached the pharmaceutical industry's code of practice for using subterfuge in an attempt to obtain an interview with a GP.

The GP complained to the ABPI's Code of Practice Committee that he had requested, by post, some Nicorette prescription pads and patient information leaflets. The representative called at the surgery but went away without leaving the material when the secretary said the doctor was unable to see him. The GP thought the offer of the goods constituted a bribe for him to see the representative.

Lundbeck explained that representatives were told not to leave the material with secretaries or receptionists but to demonstrate Nicorette's use to the doctors. But the Committee saw no reason why the material could not have been left with the

secretary and ruled that the action breached the code.

A similar case was considered not to be a breach. The same GP complained that a representative from a non-ABPI member company had called to give him a book on a subject in which he had previously expressed interest; the representative had gone away without leaving the book when told by the secretary that the doctor no longer wished to see representatives. The company considered that the material, a symposium report, could not be considered a bribe.

Although seeing no reason why the report could not have been left, the Committee accepted that there was no intention to make its provision conditional on an interview with the doctor, so there was no inducement or subterfuge.

The cases are mentioned in ABPI's December 1988 reports.

## Sawtry still in limbo

Cambridgeshire Family Practitioner Committee is still awaiting clarification of the status of the Sawtry pharmacy of Mr B. Lakhani (C&D December 17/23).

The future of his shop and the validity of his contract are in doubt after a dispensing doctor practice in the village successfully sought a judicial review of the Rural Dispensing Committee decision allowing it to open.

However, FPC administrator Mr B. Salter feels the Department of Health is unlikely to clarify the situation for him, and is seeking independent legal advice. "In the meantime we have invited the doctors concerned to prescribe for new patients who have registered with them," he says.

Mr Lakhani is also taking legal advice. The LPC is pursuing the FPC to ensure it enforces the GPs' terms of service.



# Mellor says 'no' to grading funds meeting

Health Minister David Mellor has turned down a request from hospital pharmacist negotiators for a meeting to discuss the funding of the new grading structure. The Guild is now to ballot its members of the management side's offer, which, it is suggested, will give increases, backdated to April 1, 1988, of between 7.33 per cent and 11.11 per cent over April 1987 pay levels.

The staff side chairman, Bob Timson, had written to Secretary of State Kenneth Clarke requesting the meeting after progress foundered "on the lack of identified funding for the regrading aspects of the proposed new structure".

The staff side view was that unless new money was provided centrally, as it was for the nurses settlement, health authorities would not have the resources to implement the new structure. In his letter, Mr Timson said that most of the benefits envisaged by the recently published health circular "The way forward for the hospital pharmaceutical service", including clinical pharmacy in all hospitals, patient care improvements and increased cost-efficiency in medicine use, would be unattainable.

## Mellor welcomes support

In his reply to Mr Timson dated December 19, Mr Mellor welcomed the four to one vote in favour of the new grading structure, and the Guild's support for the proposals in the health circular.

But he said he saw no inconsistency between DoH commitment to the hospital pharmaceutical service as set out in the circular and the funding of pay awards for non-pay review body staff.

The additional provision for nurses this year was "wholly exceptional", Mr Mellor said. "It is, in no sense, a precedent or standing arrangement that can be said to apply to any other set of grading proposals".

Mr Mellor said the likely additional cost of the pharmacist pay and regrading exercise was very small in comparison with the cost of the nurses clinical grading review, and regional chairman had assured ministers that additional costs could be met. "There is therefore no question of additional funding."

"I do not believe that such purpose would be served by a meeting," Mr Mellor concluded.

Commenting on the reassurance by regional chairman of full funding of the offer, Mr

Timson told *C&D*; "We have to take it at face value and hope that the commitment is met."

In the face of the rejection of a meeting, the staff side team agreed, on December 20, to put the management side's offer, accompanied by a staff side commentary, to a ballot. Papers will be issued by January 19; the closing date is February 9.

Members will be asked to vote on the new salary scale — a

"spine" of 35 £600 increments from £9,500 to £29,900 with the eight overlapping grades covering three to eight points of the spine.

Management side envisages local reviews to determine assignment within a new structure to be completed within four months of the agreement, which would also release the 3.1 per cent increase dated from December 1, 1987 agreed in the last pay round.

The regrading exercise might result in some pharmacists achieving a higher grade, Mr Timson said. Downgrading was unlikely, he added, as grades are protected by some of the paragraphs in the offer, but in theory it was possible that a small number may be downgraded.

Annual leave and other entitlements like lecture and late clinic fees are also amended in line with the new grades.

## NEWS REVIEW

# In-surgery pharmacies — new case law to set opening trend?

The trickle of in-surgery pharmacies opening in the country could become a flood in the near future if recent decisions by Kent Family Practitioner Committee and the Secretary of State for the Environment are upheld elsewhere.

In Folkestone, the "major relocation" of a pharmacy into the same building as a group practice surgery has been approved as "necessary" or "desirable" by the Kent pharmacy practice subcommittee (*C&D*, December 10 p989). Now, in a ruling on the Hounslow planning inquiry, Nicholas Ridley took the view that in December, the "retail" nature of Mrs Shashi Gossain's business at 464 Great West Road was so insignificant that it did not matter for planning purposes.

Mrs Gossain, who actually closed the business in October, won her appeal against Hounslow Borough Council's contention that planning permission for the pharmacy was required, and an appeal against the enforcement notice served on her by the Council. However, her application for costs from the Council was refused.

In granting Mrs Gossain's appeal, Mr Ridley overruled his inspector, Mr D.O. Morgan, whose own conclusion was that the retail pharmacy use for which the appeal premises were legally registered under the Medicines Act constituted "a material change of use of the surgery premises within which it is located, for which planning permission is required."

Mr Morgan said it may be that as the premises, a small room measuring 8ft by 7ft 6in, was effectively being used only as a "dispensary", it was a matter for the regulatory authorities under the Medicines Act, ie the Royal

Pharmaceutical Society. But the pharmacy business as proposed and conducted was independent of the surgery in legal, professional and accounting terms, so could not be regarded as ancillary to the surgery.

The inspector went on to consider the status of the pharmacy in relation to the Use Classes Orders of 1972 — the one in force when the pharmacy opened in early May 1987 — and 1987 — the one in force when the Council considered the application for determination of whether planning permission was required. He took the view that, however small the retail function of the business, a "retail pharmacy" is not a "dispensary" as described in the 1972 Order. And, according to the 1987 Order, dispensing is a use normally carried out by pharmaceutical chemists whose business falls in the shops class. Therefore, under either Order, development was involved.

However, the Secretary of State took a different view. Mr Ridley decided that, firstly, since the use of the premises commenced soon after Mrs Gossain made her original application, the Section 53 determination — whether planning permission was required — should have been made under the 1972 Order, not under the 1987 Order in force when the Council made its decision on July 28 last year.

The Secretary of State also decided that the "retail pharmacy" definition of the Medicines Act was of less importance in planning terms. "It is an error of interpretation to attempt to apply a meaning to words given in one statutory provision to the terms of another".

The inquiry heard that Mrs

Gossain had dispensed 34,000 prescriptions between May 1987 and April 1988; only six were prescriptions from doctors outside 464 Great West Road; only 10 per cent of non-exempt patients had bought their medicines at cheaper cost than the prescription charge, and there had been only three over the counter sales in 14 months. Retail sales accounted for less than 3 per cent of the cash turnover, which was in excess of £100,000.

Taking into account the statistics of the business, the Secretary of State decided that the retail sales of medicines and other pharmacy goods comprised such a small amount as to be *de minimis*, and could therefore be disregarded for planning purposes.

Taking into consideration further that the clients of the pharmacy would, in fact, be the patients of the surgery visiting the dispensary on their way out, the Secretary of State concluded that the "dispensary" was ancillary to the surgery, so did not constitute a material change of use. However, he did agree that a material change of use constituting development of the land could take place if the proportions of "outside" items dispensed or the numbers of retail sales were to change significantly.

In quashing Mrs Gossain's application for costs on the Section 88 (enforcement notice) appeal, the Secretary of State agreed with his inspector that the Council's handling of the case, which culminated in a two-day hearing, was not unreasonable.

A spokesman for the Department of the Environment told *C&D* that the outcome of a planning inquiry was, in effect, case law, though the result is open to appeal through the courts.



## IPU urges 'talk to your pharmacist'

The Irish Health Minister is to be invited to launch a major campaign for the Irish Pharmaceutical Union in March with the message "Talking to your pharmacist is good for your health".

The campaign, taking a leaf out of the NPA's book, will have the dual objectives of persuading the public to talk to the pharmacist about their illness, while encouraging the pharmacist to give more advice and information about medicines as they are handed out.

Two leaflets — one for general distribution and the other for inserting in bags with medicines — have been printed. Advertising in the national and provincial media (possibly sponsored by the industry) is being investigated.

## Merchants' fees up

The premises registration fee for merchants in veterinary drugs has increased from £130 to £150. The retention fee goes up from £91 to £99.

The changes came into effect on January 1 under the Medicines (Exemptions from Restrictions on the Retail Sale or Supply of Veterinary Drugs) (Amendment) (No 2) Order 1988 (SI 1988 No 2136, HMSO £2.60). The Order requires merchants in veterinary drugs or horse wormers to agree in writing to comply with their relevant codes of practice before their names can be registered.

The Order also updates the list of veterinary drugs sold by merchants and those drugs incorporated into feeding stuffs.

### BRIEFS

**Tretinoin or retinoic acid and its salts** are banned from use in cosmetics by Regulations which came into effect on January 1. The Cosmetic Products (Safety) (Amendment No 2) Regulations 1988 (SI 1988 No 2121, HMSO £1.30) amend the lists of permitted colouring agents and preservatives and clarify the permitted uses of thioglycolic acid, among other changes.

**Fine Chemicals Ltd** The fax number currently appearing in the 1989 edition of Chemist & Druggist Directory has been changed and should read 0342 410806.

# TOPICAL REFLECTIONS

by Xrayser

## Open and shut case?

What a curious situation we have in Hounslow. Mrs Shashi Gossain voluntarily closed her pharmacy (situated in her doctor husband's surgery at 464 Great West Road) in October in the middle of a planning dispute with the local authority. However, she has won her appeal against a decision that it needed planning permission. Now, quite apart from any pharmaceutical implications, this has to be exceedingly bad news for Hounslow Borough. Such a decision must greatly damage the confidence of any body trying to maintain a semblance of rational town planning in highly complex city and suburban life.

Then in another case of now-you-see-it, now-you-don't, we learn that Lloyds have won their case against Sandwell FPC. The FPC granted their application to open a pharmacy under the old regulations, even though the application arrived too late for the deadline (because it had been sent to a neighbouring authority by mistake, but on time...). Then, after the pharmacy had opened, changed its mind and withdrew the contract! Never mind whether the opening was justified or not, as the appeal judge said, the situation was bizarre. And intolerable.

## Ilford sold again

I see Ciba Geigy Ltd have sold our old English film maker to International Paper Corporation — apparently the world's largest paper company.

When I started in pharmacy Ilford was a name to conjure with, making fine films and cameras and chemicals and equipment, and selling them world-wide. Until recently I still had an Advocate 35mm camera — a product years ahead of its time, being compact, robust, with a



wide angle 35mm lens as standard. I sold mine to a collector — for a tidy sum, too. I love "collectors", particularly when they can tell me so much more about things than I ever dreamed. And how grateful I am when they force me to part with some old treasure from my stockroom where, if it hadn't been for their insistence, it might have lingered dankly until the mighty dustbin took it to the last great resting place.

But back to the point. I was highly interested to learn Ilford made £190m sales in 1988. What do they sell today? The only representation on my shelves now are the HP5 and FP4 films, but a reference to the C&D Price List reveals the familiar range of chemicals and papers still continue. In these days of multinationals, I suppose we must expect small firms to change hands regularly. It's a sad sort of nostalgia which finds me thinking it would be nice if Ilford was owned by Ilford and run as an English company.

## Reasoned resignation?

Meir Kattan, of the British Pharmacists Association, thinks it is a strange coincidence that two of the profession's chief negotiators resigned just before the Government announced its abandonment of the cost-plus contract. He refers to Alan Smith of the Pharmaceutical Services Negotiating Committee and Mr Mullen of the Pharmaceutical General Council. He goes on to say that if the two men left because they knew what the Government was going to do, then all the members of negotiating committees should resign! Great! Just what the DoH would like. Then they could look forward to a brand new inexperienced crowd to deal with. Such reasoning!



# COUNTERPOINTS

Peaudouce (UK) Ltd want their latest launch to revolutionise the UK disposable nappy market, establishing new standards for the industry.

They are introducing an environmentally sympathetic disposable nappy range in mid-January called Peaudouce Ultra Plus which they believe will help reduce pollution.

The range will be available in five sizes from newborn to extra large, and includes a new maxi plus size. The range will replace Babykini and Babyslips brands.

Most UK disposable nappy brands are padded with wood pulp, bleached by chlorine-based chemicals to give a "brilliant" white appearance. The chlorinated waste is then pumped into rivers and seas, having a harmful effect on fish and sealife. Only 45 per cent of the tree is used for the fluff pulp padding and the remainder is burnt.

The new product uses a process which is chlorine free and uses more than 90 per cent of the tree. For every tree used, the company plants three more. The fluff pulp padding is a natural

## "Natural" nappies from Peaudouce



creamy white colour, not the usual artificial white, but is as thick, soft and absorbent as conventional pulp, the company says.

Mike Chambers, Peaudouce (UK) Ltd managing director, says: "Our research has shown that today's mothers are far more

concerned about environmental issues that might effect the future of their children, than about small cosmetic differences, especially as the fluff pulp padding is hidden away in the core of the nappy."

Peaudouce's Swedish parent company, Svenska Cellulosa AB, pioneered the new process and has already introduced it to its nappy products. Now all Swedish nappy brands are environmentally sympathetic. The Swedish Government is investigating the chemical pulp process of chlorine bleaching and researching alternatives.

The product will be marketed in new packaging with stickers highlighting the environmental benefits. Each pack will contain a consumer leaflet explaining the change. An advertising and public relations drive will include a sampling campaign, roadshows and exhibitions as well as mailings to clinics and healthcare professionals. The total investment, at around £10 million, represents Peaudouce's biggest ever business development programme. *Peaudouce (UK) Ltd. Tel: 0992 445522.*

## Now Finalé ultra hold from Clairol

Bristol Myers are launching a third variant of their Clairol Finalé non aerosol hairspray in January.

The new variant has an RSP of £1.59 and comes in a 125ml bottle. It will also be available in a 50ml trial size with an RSP of £0.49.

A £2.5m support package for the brand breaks in February, and will include national TV advertising, sampling of Ultra Hold in March, and increased point of sale material.

Clairol Finalé ultra hold is targeted at the 16-24 age group, which accounts for more than one quarter of heavy hairspray users, say Bristol Myers. They say that strong hold hairsprays account for 50 per cent of hairspray sales and that this sector should continue to grow. *Bristol Myers Co Ltd. Tel: 0784 34343.*

## Bergasol care for hair

Chefaro have announced plans to extend their Bergasol range in 1989, with the introduction of three hair and body care products.

The new products — an After Sun Shampoo and shower gel (175ml £4.25); a protective hair gel (125ml £3.95) and an After Sun Conditioner (125ml £3.95) will be launched in January.

Bergasol After Sun Shampoo and Shower Gel contain collagen and vitamin B, and conditions sun dried skin and hair and also removes chlorine.

The protective Hair Gel contains a u/v filter and vitamin B to help protect the hair from the damaging effects of the sun, sea, and chlorine. The fine gel formulation, presented in a 125ml tube, should be applied to the hair before going into the sun.

The After Sun Hair

Conditioner is packaged in a tube and is an intensive moisturiser enriched with jojoba. It is said to help restore moisture and manageability to damaged hair.

All three products have a citrus fragrance. The Company is also adding an Ultra Protective Tanning Cream (SPF 10, £50ml, £4.25) to the range and repositioning their Tinted Facial Cream as a product with tanning and cosmetic benefits.

Bergasol After-Sun Soother will be sold with a pump spray action, which Chefaro say will make its application more easy and economical, and Bergasol After-Sun Moisturiser has a new enriched moisturising formula with a dermocalmine, karite butter and added vitamins A and E. *Chefaro Proprietaries Ltd. Tel: 0223 312956.*

## The Boss

Boss are introducing men's shampoo into their existing bath line range for 1989.

The shampoo will be available in two variants, one for dandruff and one for everyday use.

Both products are uncartonned and packaged in unbreakable 200ml bottles that carry the Boss Logo with the line design imprinted on the front. They will retail for £9 each and are available to all appointed stockists of Boss from February. *Network Management Ltd. Tel: 01 560 1200.*

## Top locks

Elida Gibbs' Timotei conditioner and shampoo will be introduced in new flip-top bottle from January 1989.

The new caps are in the same forest green as before and match the graphics on the packs. *Elida Gibbs. Tel: 01-486 1200.*



# ANOTHER CASE OF GROSS OVER-GENEROSITY.

*(BUT ONLY UNICHEM CHEMISTS CAN INDULGE.)*



This January, UniChem chemists everywhere are going to be rubbing their hands together.

Throughout the whole month, everyone ordering 5 cases of Durex will receive a sixth absolutely free.

Your customers are going to benefit too. There's one extra for them in every pack of twelve.

To make thirteen your lucky number, make sure you see your UniChem representative while he's still in a generous mood.



**UniChem**

UniChem Ltd, UniChem House, Cox Lane, Chessington,  
Surrey KT9 1SN. Tel: 01-391 2323.



## Merrell Dow back Syndol

Merrell Dow are backing Syndol with new merchandisers and a continuing advertising campaign.

POS material includes a dummy of the new pack introduced last month, with header card. The new pack now features the phrase: "For fast relief from tension headache". And there is a tower unit displaying 10s, 20s and 50s sizes.

The national newspaper advertising campaign is to continue until March. Merrell say that "tension headache is suffered by one in four of the population and their campaign recognises the importance of the pharmacist in counter prescribing. Their policy is to offer pharmacists a minimum of 50 per cent outlay before bonuses, they add. *Merrell Dow Pharmaceuticals Ltd. Tel: 0784 61600.*

## Specials from Old Spice

Shulton are promoting Old Spice during January and February with a number of special offers.

The 150ml after shave will be available at £3.49, or 50p off RSP; while the 250ml bottle will retail at £4.99, a discount of £1.46.

During the same period, two further special offer packs will be available nationally. Smooth Shave foam will retail at £0.99, or 50p off RSP. And both the aerosol deodorant and anti perspirant will appear in added value 25 per cent extra packs. *Shulton (GB) Ltd: 0734 793000.*

## Durex offer

UniChem are offering a Durex exclusive offer in January when members will receive one case free for every five cases ordered.

A special Dentinox baby medicine unit containing teething gel, colic drops, and cradle caps, will also be available at a discount of 17.5 per cent throughout January. *Unichem: 01-391 2323.*

## £6m launch for Plax dental rinse

This year a £6m promotional campaign is to be put behind a new oral hygiene product — Plax — being launched by Food Brokers this week on behalf of Unicliffe.

The product is described as an anti-plaque pre-brushing dental rinse intended to be used just before brushing the teeth and claimed to significantly improve the amount of plaque removed by the mechanical action of brushing.

Plax is already marketed in the US by owners Pfizer, Unicliffe's US parent company, and is claimed to be worth \$200m at rsp with over half of US dentists recommending it.

By the time pharmacists hear about the product in the UK dentists will have already been approached as they are seen as a key element in the product's success here too.

Plax — a red liquid in a clear plastic bottle — comes in two sizes: 250ml with an rsp of £1.95 which is expected to sell out at £1.79, and 490ml, rsp £2.70, expected to retail at £2.49. It contains the active ingredients sodium benzoate (2 per cent), Polysorbate 20 (0.84 per cent) and sodium lauryl sulphate (0.25 per cent). It is recommended that about a tablespoon of undiluted liquid is rinsed around the mouth for 30 seconds before brushing the teeth, twice a day.

Food Brokers director, Arthur McCarten, told *C&D* that although the product is to be sold through grocery as well as pharmacy and drugstore outlets he is not expecting heavy discounting. And he estimates sales will split 50:50 between



grocery and pharmacy sectors. The company has already had an "enthusiastic" response from Boots over the product, says Mr McCarten.

Experience from the US suggests that Plax will not cannibalise sales of other products, according to Mr McCarten.

Following the initial sell-in to the trade when there will be bonus offers, a national Press campaign begins in February concentrating on women's magazines with a spend of some £900,000. A five week heavyweight television campaign is scheduled to begin in March followed by bursts through to September. Some £2.5m has been earmarked for television advertising, says Mr McCarten. In addition there will be POS material, and money-off coupons, the company says.

Plax is available from chemist wholesalers and from *Chemist Brokers, division of Food Brokers Ltd. Tel: 0705 219900.*

## Ready, steady Ready spex

Now that reading glasses may be sold without prescription from retail outlets, Crown Eyeglass Group are offering a starter pack on Readyspex.

The deal comprises 25 pairs of reading glasses and 10 spectacle cords in a self-selection display (£45 trade plus VAT). Money will be refunded in full if the starter pack is returned within 28 days. The spectacles come in nine strengths and retail at £2.99 per pair.

National advertising is planned from the first week in February in the *News of the World*, *The People*, *Daily Mirror*, *Sun*, *Star*, *Woman's Own*, *Radio* and *TV Times* and others. *Crown Eyeglass plc Group. Tel: 0254 680010.*

## Nit pickers!

International Laboratories Ltd have modified the Derbac nit comb (£1.15) and introduced a Suleo lice comb and detector (£1.65).

Both combs are moulded from plastic and are said to give the comfort of plastic with the performance of metal. The Suleo comb has a built-in magnifier to help identification of the problem. *International Laboratories Ltd. Tel: 0420 88174.*

## Foam bath from Vantage

Vantage have introduced a moisturising creme foam bath in two fragrances.

The bath (£0.95) in peach blossom and alpine herb fragrances, is designed to cleanse and moisturise the skin, and a one litre bottle provides approximately 30 baths, says Vantage.

The creme foam bath is available to the trade in outers of six, with a special introductory trade launch price of £3.60 per outer. *Vantage: 0928 717010.*

## Wisdom's Plaque attack

Wisdom are offering a trial promotion for their new Plaque Control toothbrush.

The promotion, which starts in mid-January, offers customers the chance of purchasing the brush at £0.99 instead of the recommended selling price £1.19.

The promotion is available in

flashpack cartons in flashed shoes of 12 which come in a special six dozen display unit containing two dozen adult compact head, two dozen adult regular, one dozen adult long head (medium) and one dozen adult long head (firm) say the company *Addis Ltd. Tel: 0992 584221.*

## FENNINGS LITTLE HEALERS

in packs of 36 and 90 tablets

This old established and popular remedy is available for prompt delivery from:—

**J. WATERHOUSE & CO. LTD.**

**Unit 7, Shepley Industrial Estate South, Shepley Road  
Audenshaw, Manchester M34 5DW. Tel: 061 3204710**





# Beecham's new wave freshener

Beecham Toiletries have launched Aquafresh breath freshener.

The product, manufactured in Germany, comes as a pump action, non-aerosol spray. It is spearmint flavoured with "spicy notes", and is sugar-free.

Aquafresh breath freshener comes in a 15ml size retailing at around £1.49. Beecham say the product is targetted at 18-24 year olds, and that the mouth freshener market is worth some £3.5m (RRP).

The launch coincides with a £1.3m television advertising campaign for Aquafresh toothpaste in the Spring, and "ties-ins" between brands are planned during the year, the company says. And a sampling and PR campaign will further support the



launch. Beecham Toiletries. Tel: 01-560 5151.

## Dentemp plugs the gap!

Dentemp, a temporary dental cement for emergency home use to replace lost fillings, is being made available nationally by A1 Pharmaceuticals.

The ingredients, zinc oxide and eugenol, are mixed to make a soft "putty" (£2.99).

A1 have been appointed UK agents for a range of American products for restoring colour to grey hair. Groom Away Gray (£2.99) is intended for Afro hair while Youthair creme/liquid and Super Youthair (all £2.99) are intended for non-Afro hair.

A range of vitamin E products includes oil, night cream and hand and body moisturising lotion.

A1 have also taken over distribution of Nu-slim, for which pharmacists are offered samples and promotional materials.

Bonuses of 8 as 6, 17 as 12 and 50 free with 100 are available on the Signal CT10 digital thermometer which made its debut at Chemex. A free digital thermometer is available with an outer (36 packs) of Super 25 disposable mini-filters for cigarettes, now available nationally. Samples of the mini-filter are offered to pharmacists.

All products other than the thermometer are available on bonuses of 7 as 6 or 15 as 12. A1 Pharmaceuticals. Tel: 01-582 4844.

## Fiesta's got loads-a-money

Buyers of Quilted Fiesta kitchen towels will be able to cash in on the brand, and take part in a big money draw, through a "Cash Fountain" on-pack promotion.

Special packs of Fiesta will carry a special coin token which is designed to stimulate trial and encourage repeat purchase.

The promotional packs of fiesta will be available during February and March giving consumers who collect the tokens the chance to collect from £1 (for three tokens) up to £2 (for five tokens). The offer is limited to one application per household.

In addition, there will be 12 weekly free draws when £1,000 will be won by the sender of the "Cash Fountain" entry drawn out of the bag. Scott Ltd. Tel: 0342 27191.

## Stoppers!

Stoppers' anti-smoking lozenge will be supported by £400,000 of national newspaper advertising in 1989.

Manufacturers Leo Laboratories say the total value of the market has more than doubled since 1987 and will rise again to £1.8m next year. Leo Laboratories Ltd. Tel: 08444 73336.

Reckitt & Colman have introduced Halib-blackcurrant (60s £1.75 rrp; 12s £13.15 trade). Reckitt & Colman. Tel: 0482 26151.

# Even more effective action from Kwai in '89!

## Heartfelt thanks

They're an excellent product - a must in my life now.  
Mrs J Martin, Chatham, Kent.

This is a very easy way to take garlic.  
Mr and Mrs Smithurst, Sutton-in-Ashford, Notts.

When I bought a garlic pod before it did not work. I found Kwai again because I have faith in this product. I believe garlic and think this is the nearest to natural clove.  
Mrs W Hooper, Penarth, S. Glamorgan.

Other products seemed to be but Kwai was the best for what I wanted, no taste, no smell, reasonable price.  
Mrs M Connor, Glasgow, Scotland.

Marvellous, excellent 20 years younger. I can tell all my friends. All I do is Mr J Brooks, Warrington, Cheshire.

I'm always looking for a product and so am giving I think you've got it. I'm giving it to my husband and I'm giving it to my friends.

As I dislike the smell of garlic Kwai tablets are ideal because they are odourless - will buy again for continued beneficial reasons.  
Mrs C Newland, Norwich.

Kwai is a new product, of which I am asking an opinion confirm their 'satisfaction' and intention to continue its use.

## NOW IT'S BRITAIN'S 'SPICE OF LIFE' TOO!

## BRITAIN TAKES 'SPICE OF LIFE' TO ITS HEART

Over 1 million Germans supplement their daily diet with a highly concentrated garlic tablet called Kwai.

In just a year it has become Germany's most popular health-care product.

Introduced here in the Spring of '88, it has already had a phenomenal reception in Britain too.

Modern research is fortunately finding new evidence of the way in which certain natural food products like garlic are in tune with our bodies and can be taken regularly without causing adverse effects.

As Mr J P. Richardson writes: "I have found new evidence of the way in which certain natural food products like garlic are in tune with our bodies and can be taken regularly without causing adverse effects."

degrading some of the nutrients - particularly 0.1% - 0.2% of important, alicin-forming substances, and alicin-forming substances. Kwai retains all the essential constituents of garlic, and is odourless, tasteless, and easily swallowed. It is particularly important alicin-forming substances and alicin-forming substances. Kwai is made from the finest Chinese garlic cloves gently dried in the process, retaining

### AL FORM

"second generation" which overcomes the problem through technology. Most provide only direct garlic oil in process normal constituents. The garlic is odourless, tasteless, and easily swallowed. It is particularly important alicin-forming substances and alicin-forming substances. Kwai is made from the finest Chinese garlic cloves gently dried in the process, retaining

The Launch in 1988 of Kwai Highly Concentrated Garlic Tablets, Germany's No.1 OTC health care brand, has been a huge success.

Kwai is already established as a major brand with many thousands of satisfied and loyal users, who have found it to be the ideal way to take garlic whatever their reasons.

Our massive educational P.R. and advertising programme has revitalised and expanded the dormant garlic market. Kwai now provides consumers with a highly superior second generation product, rich in garlic's original constituents and alicin yield, yet free from the obvious social disadvantages.

And 1989 will see even more marketing support.

- New testimonial advertising campaign starting NOW
- Increased P.R. and promotion activity starting NOW
- Even heavier media spend starting NOW
- New and comprehensive range of p.o.s. material\* available NOW

So start stocking\* up NOW and benefit from this further expansion of Kwai's innovative marketing action.

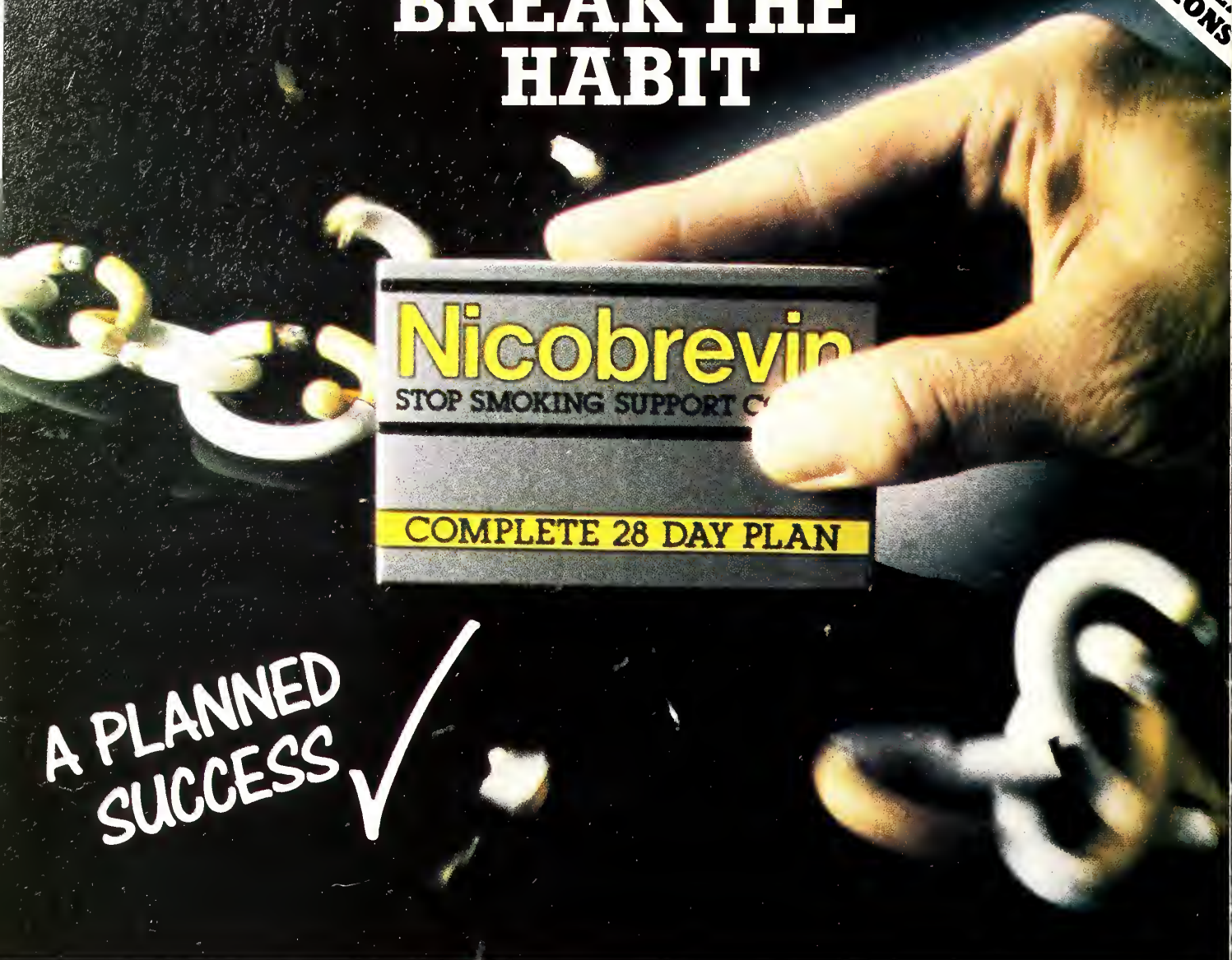
\*Please contact your De Witt salesman or call their sales office on 01-441 9310.

**Kwai** Highly Concentrated Garlic Tablets



# NOW YOU CAN HELP BREAK THE HABIT

T.V.  
ADVERTISING  
FOR 'NEW YEAR'  
RESOLUTIONS



When your customers have made the decision to stop smoking, Nicobrevin can help break the habit.<sup>(1)</sup>

Nicobrevin is a complete 28 day course of easy-to-take capsules designed to provide progressive support when giving up smoking by:

- **Reducing the craving for cigarettes.**
- **Helping to counteract withdrawal symptoms.**

At £9.45, each complete course is less than the average cost of a week's cigarettes.

To help you and your customers make an informed choice, there is a full pharmacy support package including counselling guides with demonstration of

efficacy, as well as consumer leaflets to help make the decision to give up smoking.

Nicobrevin **is a complete 28 day plan.**

**has a full P product licence.**

**is available only from pharmacies.  
and no prescription is required.**

(1) Brit. J. of Clinical Practice Sept. '88. Conclusions:-

**'Nicobrevin is significantly superior to placebo as an aid to stopping smoking'**

**'Significantly more patients rated their treatment as very effective in the active (Nicobrevin) group'**

**BREAK THE HABIT WITH NICOBREVIN**

**INTERCARE**

Building Brands for you and your Customers

COUNTER PRESCRIBING FACT SHEET PRESENTATION: Gelatine capsules containing Menthyl Valerate 100mg, Quinine BPC 1963 15mg as the active ingredients. Other ingredients are Camphor and Oil of Eucalyptus. **USES:** Nicobrevin is an anti-smoking preparation, presented as a full 4 week course. **PRINCIPAL ACTION:** Nicobrevin is designed to provide therapeutic support for people trying to give up smoking. Nicobrevin 'eases' the withdrawal syndrome and 'cushions' the residual effects of smoking. Quinine reduces the craving for tobacco by slowing down the metabolism of nicotine already present in the system. Due to its anorexic effects Quinine also helps to neutralise the craving for food. Menthyl Valerate counteracts the irritability and anxiety associated with giving up smoking. **RECOMMENDED DOSAGE SCHEDULE:** Nicobrevin capsules should be swallowed whole with a little water. The course is started in the evening and should proceed as follows. First evening before retiring. 2 capsules. 2nd-7th morning on an empty stomach. 1 capsule. 2nd-7th evening before retiring. 2 capsules. 8th-14th morning on an empty stomach. 1 capsule. 8th-14th evening before retiring. 1 capsule. 15th-28th evening before retiring. 1 capsule. **CONTRA-INDICATIONS, WARNINGS etc:** Warning: Do not exceed the stated dose. Use in pregnancy: The use of Nicobrevin during pregnancy is not recommended. **PHARMACEUTICAL PRECAUTIONS:** Nicobrevin capsules should be stored in a cool, dry place. **LEGAL CATEGORY: P PRODUCT LICENCE HOLDER:** MILLER OF GOLDEN SQUARE LIMITED. **PRODUCT LICENCE NUMBER:** 0274/0002R **DISTRIBUTOR:** Sole distributor of Nicobrevin Capsules in the U.K. is INTERCARE PRODUCTS LTD., WOKINGHAM.

"Nicobrevin" is a registered trade mark



## Windsor go for high factors

Windsor Pharmaceuticals plan a "striking new image" for their pharmacy-only Uvistat product, with four new lines being added.

The 1989 range will comprise nine products, with the four new lines being sold at the beginning of January. The Uvistat factor 10 sunscreen will no longer be the highest factor. The new range will include a Uvistat factor 20 sun bloc (50g, £3.99) and a Factor 15 sun cream (100g, £5.69).

The Uvistat logo of an orange sun is retained, but now acts as an illustration of the sun protection factor value of each product. A shaded area now appears on the sun logo, and the higher the factor, the more shading is incorporated.

Windsor Pharmaceuticals, Tel: 0344 484448.

## Microglide in 1989

Bic Microglide "performance razor" will be supported with over £0.5m in a New Year campaign which forms part of a total £1m advertising spend throughout 1989. Starting on January 16, television schedules include ITV, Channel 4 and TV-am. *Biro Bic Ltd.* Tel: 01-965 4060.

## Pure & Simple cleanse and cosset

Beecham Toiletries are launching two new Pure & Simple products — a washing gel and an oil-free moisturiser.

The first of the launches is targeted at women who dislike the drying effects of soap, say Beecham. The gel (£1.99, 100ml) contains glycerine and anthemile, and comes in an opaque pink tube decorated with the Pure & Simple logo.

The oil-free moisturiser (£2.29, 160ml) is a light, clear gel aimed at women who have greasy skin, and who may find conventional moisturisers too oily, say Beecham.

They say that the product, which contains a UV filter, is absorbed quickly to leave the skin soft and smooth.

Promotions include a special trial size pack at £0.35, and a £1m television campaign in the first



quarter of 1989 to promote the range including the two new products. *Beecham Toiletries.* Tel: 01-560 5151.

## Bronzing out of Africa

Pava are launching a new "suntanning" product called Terra Africa Body Bronzing Lotion.

The product does not stain the skin, but colours it, and can easily be washed away, say Pava.

Terra Africa (£3.95) is applied with a cotton wool swab and produces a smooth, non-streaky

colour, they say. The lotion is lightly fragranced and contains conditioning agents to moisturise the skin.

It is also suitable for sensitive skin, say Pava.

Terra Africa comes in a 250ml glass bottle with screw top and is available in outers of six. *Pava Ltd.* Tel: 0929 45266.

## Sally Hansen's beauty sleep

Network Management have launched a Sally Hansen night time nail treatment called Renew-a-Nail.

The formaldehyde-free formulation is said to contain essential vitamins, minerals and protein to condition damaged nails or nails weakened by use of artificial nails.

Renew-A-Nail comes in a frosted apothecary bottle with a separate dropper, and is packaged in the Sally Hansen grey and orange carton. It costs £2.95 for 11.8ml. *Network Management.* Tel: 01 560 1200.



*David Anthony Pharmaceuticals* will no longer distribute the Buf Puf range. 3M are extending their in house distribution to include this brand. *3M UK Plc.* Tel: 0344 58407.

### ON TV NEXT WEEK

GTV Grampian	U Ulster	STV Scotland
B Border	G Granada	(central)
C Central	A Anglia	Y Yorkshire
CTV Channel Islands	TSW South West	HTV Wales & West
LWT London Weekend	TTV Thames Television	TVS South
C4 Channel 4	TV-am Breakfast Television	TT Tyne Tees
<hr/>		
Beechams hot remedies	All areas	
Benylin	All areas	
Day Nurse/Night Nurse	All areas	
Day & Night:	All areas	
Listerine:	All areas	
Macleans toothpaste:	All areas	
Pulmo Bailly:	TT, Y, C	
Simple skin care:	All except LWT and TV-am	
Sinutab:	All areas	
Tixylix:	All except TV am	
Triogesic:	S, Y, G, HTV, U	
Venos	All areas	
Vosene:	GTV, U, STV, B, G, Y, C, TTV	



Seven Seas staged a lively promotion on the forecourt at Waterloo Station during the first week in December which helped raise awareness of their herbal remedies and raised money for charity. Among the belly-dancing, a clowning and aerobics, product manager for Seven Seas herbal remedies Suzanne Humphries (right) presents £1,000 to Janet Johnston, representing Help the Aged



# SCRIPT SPECIALS

## Dual action alpha-blocker from Pfizer

A new once-daily anti-hypertensive agent that also reduces plasma cholesterol is to be launched by Pfizer on Monday.

Cardura contains doxazosin, a selective alpha<sub>1</sub> receptor blocker, that is a quinazoline derivative related to prazosin, with a longer duration of action (half-life 22 hours). Pfizer say a single daily dose gives sustained control of blood pressure.

It works by reducing systemic vascular resistance. The drug also improves peripheral blood flow without reducing cardiac output at rest or during exercise, and central side effects are minimal.

Unlike non-selective alpha-blockers Cardura does not cause tolerance, says the company. In addition to the antihypertensive effect, in short term studies Cardura has produced a modest reduction in plasma cholesterol and LDL (low density lipoprotein) levels.

Initially, the product will only be available to hospital prescribing physicians but will be introduced into general practice later in the year, say Pfizer.

**Manufacturer** Pfizer Ltd, Sandwich, Kent

**Description** White tablets containing doxazosin mesylate to the equivalent of 1, 2 and 4mg doxazosin. The 1mg tablets are

pentagonal and marked "dxp1" on one side, 2mg are ovoid and marked "dxp2" and 4mg are square and marked "dxp4". All strengths are marked "Pfizer" on one side

**Uses** First-line treatment in hypertension as the sole agent or in combination with a thiazide diuretic or a beta-blocker

**Dosage** Initially 1mg once daily which may be increased after one or two weeks to 2mg, or dependent on the response, up to a maximum dose of 16mg

**Side effects** Postural hypotension rarely associated with fainting, dizziness, vertigo, headache, fatigue, asthenia and oedema

**Contraindications, warnings, etc** Known hypersensitivity to quinazolines, nursing mothers as it accumulates in breast milk. Cardura is highly bound to plasma proteins (98 per cent) but no effect on binding of digoxin, warfarin and other agents has been demonstrated. In pregnancy it should only be used when potential benefits outweigh risks

**Supply restrictions POM**

**Packs** Calendar packs of 28 tablets: 1mg £9.60; 2mg, £12.80 and 4mg £16 (all prices trade)

**Product licences** 1mg 0057/0276; 2mg /0277 and 4mg /0278

**Issued** January 1989

## New vaginal oestrogen

Ortho-Gynest V, a topical formulation of oestriol for vaginal use, will be available from Cilag Ltd from January 16.

It is a white to yellowish cream containing 0.01 per cent w/w oestriol, a naturally occurring oestrogen which acts on the vulva, vagina and cervix. The cream is indicated for the treatment of atrophic vaginitis and dryness and shrivelling of the vulva, in post-menopausal women, and for pruritis vulvae associated with atrophic vaginal epithelium.

The initial recommended dose

is one applicator full inserted high into the vagina, preferably in the evening. After the vaginal mucosa has been restored, dosage can be reduced to one applicator full twice weekly.

Cilag say the lowest dose that will control symptoms should be used and medication should be discontinued as promptly as possible.

Ortho-Gynest V comes in tubes of 78g (£5.40 trade) with a plastic applicator. The product licence authorisation number is 59/17/2. **Cilag Ltd. Tel: 024024 3541.**

## Pevaryl TC

Cilag are to launch Pevaryl TC, a cream containing the steroid triamcinolone and the imidazole antifungal, econazole, which is also active against gram positive bacteria.

Pevaryl TC is indicated for the treatment of inflammatory dermatomycoses and will be available from January 16.

**Manufacturer** Cilag Ltd, PO Box 79, Saunderton, High Wycombe, Bucks HP14 4HJ

**Description** White cream containing econazole nitrate 1 per cent and triamcinolone acetonide 0.1 per cent

**Uses** Topical treatment of inflammatory dermatomycoses and inflammatory skin conditions complicated by, or threatened by, bacterial or fungal infection

**Dosage** Apply by gentle rubbing into affected area twice daily for 14 days. Once inflammation has gone, treatment may be continued with antifungal therapy alone until two weeks after clinical cure has been achieved

**Side effects** Transient mild irritation at site of application and hypersensitivity which usually respond to stopping treatment

**Contraindications, warnings, etc** As for other preparations containing triamcinolone and econazole, see Data Sheet

**Supply restrictions POM**

**Packs** 15g tube (£4 trade)

**Product licence** 76/62

**Issued** January 1989

## Xylocaine Polyamps

Astra Pharmaceuticals have introduced a new presentation of Xylocaine in plastic ampoules which will replace the glass range (with the exception of Xylocaine 1.5 per cent epidural 25ml).

Polyamps come in packs of ten in the following strengths: lignocaine 1 per cent (2ml, £0.53 and 5ml, £0.62) and 2 per cent (5ml, £0.78, all prices trade).

As they are made of polyethylene, the Polyamps cannot be autoclaved. **Astra Pharmaceuticals Ltd. Tel: 09277 66191.**

## Cox additions

Cox Pharmaceuticals have added the following to their range of generics: cephalixin tablets 250mg (100, £15.25) and 500mg (100, £29.87). Both are pink, film coated and biconvex and marked "G" on one side and "Cx250" and "Cx500", respectively, on the other. Flucloxacillin syrup 125mg/5ml (100ml, £3.26) is presented as a powder in white and pink layers, and triazolam tablets 125mcg (100 £6, 500 £29.40) coloured lavender and coded "3306" and 250mcg (100 £8, 500 £39.20, all prices trade) coloured blue and coded "3364". **Cox Pharmaceuticals. Tel: 0271 75001.**

## Flocare

Flocare is a new range of enteral nutrition administration equipment from the clinical products division of Cow & Gate.

The range has been designed to minimise risks of enteral feeding associated with contamination by bacteria, says the company. The number of sites through which bacteria can enter has been limited, by keeping the number of connections to a minimum.

The system offers a flexible reservoir with attached giving set which is compatible with crown capped bottles. There are three nasogastric tubes in the range, in two types: one for long term feeding made of polyurethane and a PVC tube that can be left in place for up to 10 days. The tubes are connected to "male" ends which minimise contamination and also make them incompatible with intravenous systems, the company says.

Luer locks are also used to make easier and safer connection between feed and set. There are three administration sets with air filters and an EVA pouch with attached pump/gravity set that acts as a reservoir. All products are packed in single peel pouches and have a shelf life of three years. They are not prescribable on FP10s. **Cow & Gate clinical products division. Tel: 0225 768381.**



# SANTS JOINS NUMARK NETWORK

There  
the reason  
soon start  
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harmonisation

As from January 1989 the Numark distribution network is further strengthened by the addition of Sants Pharmaceutical Distributors Ltd.

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For Further information please contact John Hine, Sants Pharmaceutical Distributors Ltd; 0782 613032 or Geoff Bass, Numark Central Office 0985 215555.



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# Now watch it perform in 1989.

Last year saw a major Bic launch in the razor market.

Bic Microglide, billed as the Performance Razor and aimed squarely at the premium end of the disposable sector, hit the shelves and the TV screens of Britain.

Not surprisingly, it soon gained itself a profitable niche. Offering Microglide stockists the chance to maximise their margins while offering consumers even more Bic value choice.

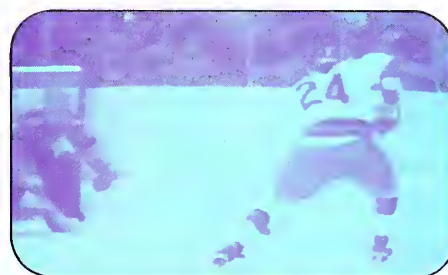
For 1989? Microglide support gets bigger and better.

Starting on January 16th, Microglide's TV schedules include ITV1, Channel 4 and TVAM. With over half a million pounds behind it over the New Year campaign period, as part of a total £1m-plus adspend throughout 1989.

From its smooth black livery to its innovative metal guard bar, Bic Microglide is designed to perform as the ultimate disposable razor. Building market share even higher alongside Bic Regular and sensitive-skin Bic Orange.

So clear a space. And stock Bic Microglide, the performance razor. But stand well back when the time comes to open the doors.

The way we make them, those razors will really move.



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**RAZORS**

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And there's a new advertising campaign utilising national press, posters and cinema.

You'll flip your lid when you see the great profits from Elida Gibbs.



ELIDA GIBBS: CARING FOR HEALTH AND BEAUTY.



# New approaches to lowering blood lipid levels

The first of a new generation of lipid-lowering drugs is hoped to be launched in the UK this year. Dr Vincent Maher from the MRC lipoprotein unit at Hammersmith Hospital in London looks at the causes of raised blood lipid levels and the impact the new drugs may have on treating one of the major risk factors for coronary heart disease.

Diseases of the cardiovascular system, especially coronary heart disease (CHD), are the most common causes of death in western society.

A number of factors have been found to be associated with an increased risk of CHD. These risk factors include age, sex, family history, blood lipids, hypertension, cigarette smoking and diabetes mellitus. With the obvious difficulty in changing one's age, sex and parents in places other than Hollywood, we are left with the group of reversible risk factors with serum cholesterol being of paramount importance.

The incidence of CHD and five year mortality from CHD increase linearly with serum cholesterol levels. The reduction of serum cholesterol by dietary or pharmacological intervention has been paralleled by a reduction in CHD mortality in many studies. Thus the evidence incriminating hyperlipidaemia, especially hypercholesterolaemia in the pathogenesis of CHD is considerable, with due respect to the sceptical view that the jury is still out!

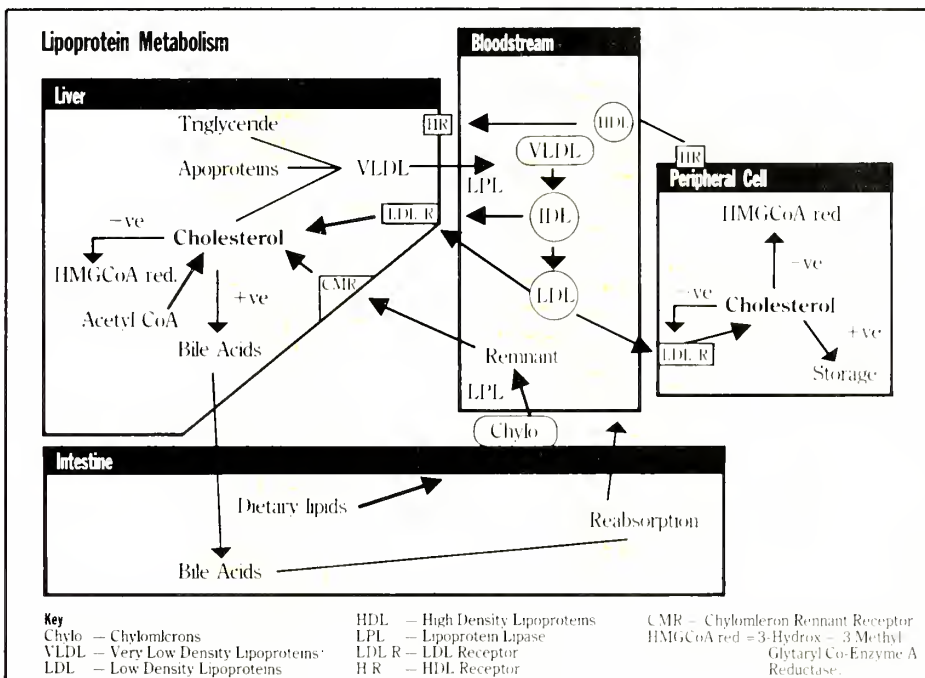
Hyperlipidaemia encompasses a group of disorders comprising elevations in serum cholesterol, serum triglyceride or both. Under normal circumstances we need cholesterol for sterol hormone, bile acid and cellular membrane synthesis. Triglycerides, among their uses, are an important energy source. The body derives cholesterol in two ways, exogenously by assimilation from the diet and endogenously by the cellular synthesis of cholesterol from acetyl CoA.

Following absorption in the intestine dietary cholesterol and triglyceride are united with apoproteins to yield water soluble lipid-protein complexes called lipoproteins, in which form they are transported in the blood stream (see diagram and explanation right).

The liver is the main route for cholesterol excretion, as free cholesterol or in the form of bile acids. Bile acids secreted into the intestine are re-absorbed in the terminal ileum and returned to the liver.

Hyperlipidaemia occurs following impaired lipoprotein metabolism leading to excess circulating lipoprotein particles. Hypertriglyceridaemia may be associated with increased levels of chylomicrons, VLDL or IDL particles. Clinical features include eruptive xanthomata (multiple small yellowish raised papules) and acute pancreatitis. It may result from excess production of triglyceride from glucose or fatty acids as in diabetes and alcoholism or impaired catabolism due to defective LDL activity.

Hypercholesterolaemia is associated with a raised LDL cholesterol and less commonly HDL cholesterol levels. Most forms of the disorder are associated with premature coronary heart disease. Commonly it is dietary but considerable interest has been focussed on familial hypercholesterolaemia, where severe hypercholesterolaemia occurs



Lipoproteins are subdivided into chylomicrons (Chylo), very low density lipoproteins (VLDL), intermediate density lipoproteins (IDL), low density lipoproteins (LDL) and high density lipoproteins (HDL). Dietary cholesterol and triglyceride are transported in chylomicrons which are hydrolysed by lipoprotein lipase (LPL) with release of triglyceride. The remnant particle is taken up by a specific chylomicron remnant receptor in the liver.

Endogenously synthesised hepatic cholesterol, triglycerides and apoproteins together with dietary cholesterol from the chylomicron remnants are secreted from the liver into the blood stream as VLDL particles. In the circulation, VLDL is hydrolysed with release of triglyceride and IDL which may be

taken up by the liver or further catabolised to LDL. The latter is the main cholesterol carrying lipoprotein in the blood and it delivers its cholesterol to cells including the liver by its interaction with a specific LDL receptor.

The free cholesterol released after hydrolysis of LDL in cells controls cholesterol homeostasis in three ways. It suppresses HMG CoA reductase activity so reducing the endogenous synthesis of cholesterol; it inhibits LDL receptor synthesis, reducing further uptake of LDL, and it enhances its conversion to cholesterol esters for storage.

When cellular cholesterol is depleted, LDL receptor activity and HMG CoA reductase activity are enhanced. High density lipoproteins facilitate transfer of cholesterol from peripheral cells to the liver for excretion.

due to a defect in LPL receptor function with resultant severe CHD.

The homozygote form occurs at a frequency of 1 in 1 million. It is associated with cholesterol levels reaching 30 mmol/L, CHD in the first decade of life and death in late teens or early twenties. Heterozygote subjects develop overt CHD in the fourth and fifth decade of life. The clinical hallmarks include tendon xanthomata, particularly extensor surfaces and commonly the achilles tendon and cornea. The latter two features, unlike xanthomata, are not specific for this disorder.

Patients with hyperlipidaemia are detected following routine screening, investigation of their skin lesions or blood analysis when CHD is apparent.

Investigation of patients warrants a 12 hour fasting blood sample analysis for serum

cholesterol, triglyceride and HDL cholesterol. LDL cholesterol is calculated from the Friedwald equation:

$$\text{LDL cholesterol (mmol/l)} = \frac{\text{total cholesterol} - (\text{triglyceride} + \text{HDL cholesterol})}{2.19}$$

Blood biochemistry is also performed to rule out secondary causes of hyperlipidaemia such as diabetes, thyroid dysfunction, renal and hepatic disease. A careful drug history is required as high efficacy diuretics, beta-blockers, isotretinoin and oral contraceptives containing norgestrol may increase plasma triglyceride levels.

Management of hyperlipidaemia necessitates a high risk individual and a population-based approach. Previous trial results including the most recent Helsinki heart study, indicate that a reduction by 1 per



cent of total cholesterol is associated with a 2 per cent reduction in CHD.

The British Hyperlipidaemia Association recommends that a blood cholesterol less than 5.2 mmol/l should be taken as the optimal value for the general population. In high risk individuals they recommend dietary treatment alone for most patients with blood cholesterol between 5.2–7.8 mmol, and drug treatment in conjunction with diet for individuals whose cholesterol is over 7.8 mmol/l, with a target cholesterol value of 5.2 mmol/l especially in younger people.

Treatment of hypertriglyceridaemia is recommended if levels exceed 3 mmol/L after correction for such factors as obesity and over indulgence in alcohol, especially if HDL cholesterol is reduced. The National Cholesterol Education Programme expert panel recommends treatment aimed at LDL cholesterol levels to achieve levels 130 mg/dl (approx 3.25 mmol/l) especially in individuals with two or more CHD risk factors.

Dietary treatment should be first line in all individuals. Basically, less than 30 per cent of total calories should be fat, with saturated fat less than 10 per cent of calories and cholesterol intake less than 300 mg per day. Dietary treatment should be continued for up to six months before drug treatment is added.

Lipid lowering drugs are of five main types: anion-exchange resins, fibric acid drugs, nicotinic acid derivatives, probucol and the newer HMG CoA reductase inhibitors.

The anion exchange resins cholestyramine (Questran) and colestipol (Colestid) bind bile acids and prevent their reabsorption, thus stimulating hepatic LDL receptors to provide cholesterol for bile acid synthesis. These drugs are very effective in treating

hypercholesterolaemic patients but can aggravate hypertriglyceridaemia and care must be exercised in such individuals. Gastro-intestinal side effects occur frequently and the drugs may become less effective with time. This is possibly due to a rebound enhanced endogenous cholesterol synthesis following depletion of cellular cholesterol.

Fibric acid drugs include clofibrate (Atromid-S), bezafibrate (Bezalip) and gemfibrozil (Lopid). Fibrates act by enhancing biliary cholesterol excretion and also promote the conversion of VLDL to LDL. Thus fibrates are effective in reducing triglyceride levels, albeit at a risk of increasing LDL levels. Fibrates have an added benefit in increasing HDL cholesterol levels which is the cardioprotective lipoprotein and this is particularly true of gemfibrozil as judged by its beneficial effects on HDL levels and CHD mortality. Their major side effects include muscle cramps and enhanced gallstone formation, particularly with clofibrate.

Nicotinic acid is particularly effective in reducing VLDL and LDL synthesis and thereby beneficial in treating both hypertriglyceridaemia and hypercholesterolaemia. Side effects include flushing, headache and postural hypotension. In combination with anion exchange resins it is very effective in lowering cholesterol levels. Probucol lowers total cholesterol levels and promotes the regression of xanthomata.

The HMG CoA reductase inhibitors are a new class of drugs which are competitive analogues of HMG CoA reductase, the rate limiting enzyme of endogenous cholesterol biosynthesis (see diagram). They reduce the cellular cholesterol pool and switch on enhanced LDL receptor activity, especially in

the liver, which promotes increased LDL uptake and thus reduces circulating LDL cholesterol levels. Compared to other cholesterol-lowering drugs these are the most powerful. Lovastatin (Mevacor) was the first of these drugs in clinical use and with doses of 20 to 40 mg twice daily, reductions of between 25pc and 40 pc have seen in total and LDL cholesterol. Simvastatin (Zocor) and pravastatin (Pravachol) are two of the newer drugs in this class.

Experience with lovastatin has shown it to be also effective in causing slight reductions in triglyceride levels while increasing the protective HDL levels. Combination with other lipid lowering drugs, particularly anion exchange resins, has led to even further reductions in cholesterol levels. Lovastatin is well tolerated with a low incidence of side effects. Muscle cramps and abnormal liver function tests may occur and must be monitored. Routine ophthalmological examinations are carried out in all patients on these drugs due to a report of cataracts occurring in dogs receiving high doses.

Hopefully, early this year we should witness the UK launch of the first of the HMG CoA reductase inhibitors, simvastatin, which will dramatically improve our armamentarium in combatting hypercholesterolaemia.

Studies using simvastatin, which appears so far to be more potent than lovastatin, and well tolerated, are currently underway to evaluate its effect on the regression of coronary artery disease. In view of the results from small reductions in cholesterol on CHD mortality, the more profound effects of these drugs on blood cholesterol levels might pave the way towards considerable improvement in CHD mortality in the future.

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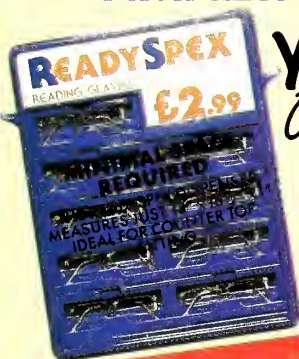
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All of which should further increase consumer confidence in the cough medicine that's recommended by more pharmacists than any other.

**Benylin**  
The number one  
name for coughs.  
Benylin is a Trademark



# Pharmacist for chemist

I fail to understand the logic of some members of our profession in proposing to surrender the title of "chemist" to the Royal Society of Chemistry and substitute it with "pharmacist." Like it or not, the general public know us as "chemists" and as such it must be one of our most valued assets.

There are many doctorates in the various professions but, to most people, "Doctor" means a medical practitioner. Likewise an "artist" is one who paints although in the wider sense it can relate to any of the arts. My certificate tells me I am a "pharmaceutical chemist." The term "pharmaceutical" is simply an adjective describing the type of "chemist."

We must acknowledge the success of the "Ask your pharmacist" campaign but we must pose the question, how much more successful would it have been if we had simply said "Ask your chemist"? Let us not either be stupid or maybe just arrogant "pharmacists" who are so much removed from reality.

Harold Porter  
Newtownards, N. Ireland

# Government attitudes

Though Mr Nathan may have made his remarks in good faith (C&D December 10, p989), he has certainly pointed out the attitude of the Government, and that its patience is running out and that it will make decisions for us.

May I point out that we are not a government department — though many in state circles would like us to be — nor are we civil servants. We are members of an honourable profession which has served the community for 150 years, looked after and protected the public and has seen many governments come and go.

Nuffield, and especially the supervision issue, raised momentous questions to which much thought and time must be given. The effect of these decisions will last for years to come.

Are we that spineless that we will be dragooned by "big brother" and sacrificed to allow the Government to find money for other purposes?

Let it provide money for these other projects, desirable though they may be, and let the pharmacist make his or her own

decisions without being blackmailed with the threat of technicians.

Mervyn Madge  
Plymouth

# The reasons why...

Mr Nathan thinks that the resistance of the membership to the policy of the RPSGB Council on supervision arises from its inability to understand what he, Dr Maddock, Nicholas Wood *et al* are telling it. Now Mr Tanna's survey suggested that around 80 per cent of pharmacists disagree with the said policy. Is Mr Nathan so naive as to believe this results from misinterpretation of Council policy?

I do believe that some confusion exists among the membership as to the details of the policy, and I believe that this results from Council's reluctance to put them into print, coupled with the fact that what is being said now seems to be a somewhat modified version of what was said

before. What is clear, however, is that whatever details emerge the foundation stone of the policy is an error of judgment that will support no superstructure.

Mr Nathan, you have made it very clear as to your opinion of the members responsible for voting you into the position from which you seek to dictate to them. As you seek to justify the unjustifiable it causes little surprise that you attempt to "rubbish" those you claim to represent. I do not feel that the majority of pharmacists are under any misapprehension as to the destructive essence of what is being proposed! Neither do I think that pharmacists are opposed to improving their image or extending their role purposefully.

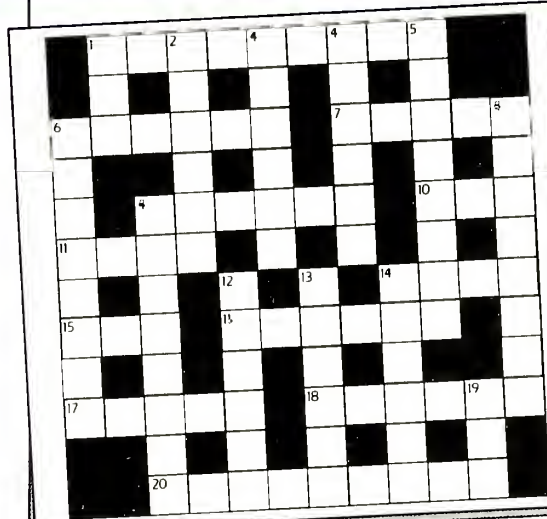
They are opposed to having their important major role sacrificed, without defence, to a cost-cutting Government. No matter what the Council says in its proposals, the direction that it would lead us in is towards contraction of the profession. The road which the Government would have us take will lead to lower remuneration, reduction in pharmacist numbers, and reduction in professional standards.

D.J. Liston  
Yardley, Birmingham

POSTBAG

## WYETH GENERICS PHARMACY CROSSWORD NO. 8

The solution to No. 8 will appear alongside No. 9 in February, 1989.



### Clues Across

- 1 To get out of the maze: pat me its soothing (9)
- 6 Hardened in rude reform (6)
- 7 He takes one and another one? Its just a craze (5)
- 9 Nearly provoke a memory of being in custody (6)
- 10 Object of the Bishop's regard (3)
- 11 Turns up about it making a row (4)
- 14 Impound me? I'm not legless (4)
- 15 Bait in here (3)
- 16 Briefly I'm sick of this ice cap (6)
- 17 Dog the newspaperman — that's better (5)
- 18 Chooses 100 steel coils (6)
- 20 Sounds like two rooms — what a pain (9)

### Clues Down

- 1 Backward fool has money (3)
- 2 Red Rum makes a killing by running backwards (6)
- 3 Sign of a starry future (6)
- 4 Italian river formed a handressing (6)
- 5 Confused big man with a nervous habit led a sheltered life (8)
- 6 Is a round pick-me-up making things equally tense? (8)
- 8 Are limbs used by alchemists (8)
- 9 He'll bring back health with rest or a queen (8)
- 12 Bell round the Eborian luxury-minded (6)
- 13 Save a Cheshire river flowing into backward French sea (6)
- 14 Hidden in tardy New Testament (6)
- 19 Cut back the brotherhood (11)

Submitted by B.E. Moulton, Barnsley S. Yorks

Prizes of £5 will be awarded to the senders of the first 5 correct solutions drawn on 10th February 1989.

Name \_\_\_\_\_ No. 8

Address \_\_\_\_\_

C&D \_\_\_\_\_

### Solution to Puzzle No. 7

Across: 1 Makes up; 7 Ironed; 8 Lateral; 9 Rims; 10 Ruse; 12 Posting; 14 Aludrox; 16 Eden; 18 Anna; 20 Otocyst; 21 Taken; 22 Satanic. Down: 1 Malana; 2 Kites; 3 Sore; 4 Pillbox; 5 Moors; 6 Met men; 11 Endured; 12 Poisons; 13 Genetic; 15 Landau; 17 Doyen; 19 Boat.

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## Trying hard...

I have been trying hard for several weeks now to keep your readers happy by not rushing pen to paper, but Mr Baumber's remarks on the comparative costs of dispensing has tried even my patience (*C&D*, December 10). I am sorry, Mr Baumber, but your arguments are misleading.

Firstly, it is irrelevant that chemists have no say in what is dispensed. The fact is, as you say, dispensing doctors *have* and a saving to the Department is thus made. An argument *in favour* of doctor dispensing!

Secondly, he has no evidence how dispensing doctors prescribe and therefore cannot base any argument on mythical figures.

Thirdly, and perhaps most importantly, Mr Baumber falls into the misleading temptation of including VAT payments in the doctor's costs while omitting to make it crystal clear that chemists are, to quote the Department: "by and large exempt from VAT". Remove this element to compare like with like and astonishingly we find that whereas the chemists' costs remain at £5.172, the doctors' *falls* to £4.88 (1986-87 figures). Around £6.5m saving to the Department — and that is before the cost of all the "new roles" fees for chemists!

**Dr David Roberts**  
Chairman, Dispensing Doctors' Association

**PSNC secretary Steve Axon comments:** PSNC has taken issue with Dr Roberts over articles on the subject of comparative costs which he has written in the Medical Press and has published a detailed refutation.

In its simplest form, the total prescription cost paid to pharmacists reimburses the drug cost together with other dispensing costs including staff employment and other overheads. If Dr Roberts wants to make a true comparison of dispensing costs then, after deducting VAT, he should add to the dispensing doctor's figure the appropriate proportion of staff employment costs and other overhead costs directly reimbursed to dispensing doctors which are neither shown nor included within the prescription cost analysis.

## Caught out at last?

Success at last! David Greenwood (*C&D* December 3 p964) has caught me out. My deliberately mind-jerking letters on the subject of remuneration have finally been rumbled. All the constituent members of the Pharmaceutical Services Negotiating Committee are most concerned about this, the main reason for their

existence.

Our constant encounters with the Department of Health are fought against the background of the Government's insistence that the dispensing of NHS prescriptions is a non-risk, not a low risk, commercial activity. Hence the apparent lower returns than would be expected from normal commercial activities.

It is now patently obvious to me at least, that the Government considers our present cost-plus contract does not provide sufficient incentive to efficiency.

However, it would appear that Government still remains committed to the proposals in the White Paper on primary health care related to the development of the pharmacist's role.

By April, 300 community pharmacies will have taken the compensation for surrendering their NHS dispensing contract. It would appear that pressure could now be put on group 2 and group 3 pharmacies in the name of efficiency.

It has been argued that our future lies in bigger, better and

# Trade fairs, exhibitions and conferences in 1989

**European Society of Regulatory Affairs**, March 2-3, Hotel Meridien, Montparnasse, Paris. Details from Dr R. Ratouis, Roussel Uclaf, 35, Boulevard Des Invalides, F-75 007, Paris.

**Exposhop '89**, Retail Interior Design and Display show, March 5-8, National Exhibition Centre, Birmingham. Details from Lee Welham, exhibition manager, Batiste Exhibitions, tel: 01-340 3291.

**EPoS North**, March 14-16, Armitage Centre, Manchester. Details from Sue Newman, RMDP, tel: 0273 722687.

**Retail EFTPOS & Financial Services '89**, March 14-16, Cafe Royale, London, W1. Details from Spectra Retail Concepts Ltd, tel: 0734 320177.

**Professional Beauty '89**, March 19-20, Novotel Exhibition Centre, London W6. Details from Marian Richardson, Maureen Cropper Associates, tel: 01-498 1011.

**National Association of Women Pharmacists**, Weekend School, March 31-April 2, Exeter College, University of Oxford. Details from Mrs Fuller, tel: 0438 367965.

**Guild of Hospital Pharmacists Weekend School**, April 7-9, Bangor. Details from John Gibbey, tel: 0602 691169.

**Institute of Pharmacy Management International**, 8th Annual Weekend Meeting, April 7-9, Belsfield Hotel, Windermere. Details from Ian Jones, tel: 0274 733466.

**Vantage 1989 Convention**, April 20-23, Interlaken, Switzerland. Details from the Vantage Department at Vestric, tel: 0928 717070.

**Cosmoprof '89**, April 22-25, Bologna, Italy. Details from the Cosmetic Toiletry & Perfumery Association, tel: 01-491 8891.

**Interpharm '89**, new exhibition for pharmaceutical profession featuring products, furnishings and fittings, April

21-23, Stuttgart, Germany. Details from CES (Overseas Ltd), tel: 01-236 0911.

**Neighbourhood Retailing**, April 23-25, Wembley Exhibition Hall. Details from Maurice Hoare, Exhibition Manager, MGB Exhibitions, tel: 01-302 8585.

**Shonex '89 and POS at Shopex**, May 14-18, Earls Court, London. Details from Guy Roukaerts, AGB Exhibitions Ltd, tel: 01-868 4499.

**2nd IRI International Symposium on Biotechnology**, "Biotherapeutic medicines: from laboratory to patient", May 16-18. Details from Symposium Secretariat, Geoff Brown, CEP Consultants, tel: 031-557 2478.

**Phytolia '89**, The 2nd Medicinal, Aromatic and Industrial Plants' International Open-days for Professionals, May 25-28 at Chemille, France. Details: Michele Duval 5 avde Contades, BP1807-49018, Angers, France.

**Afro Hair & Beauty '89**, May 28-29, Kensington Town Hall, London. Details from Jane Hammond, Trident PR, tel: 01-878 9344.

**WPFMM 9th General Assembly and AESGP 25th Annual Meeting**, June 4-7, Rome. Details from Gopa Mitra, PAGB, tel: 01-242 8331.

**Scan Tech UK '89**, June 13-15, Birmingham Metropole Hotel. Details from Stella Stiegel AIM UK Secretariat, tel: 0422 59161.

**Beauty International '89**, July 2-4, Novotel Hammersmith, London. Details from Howard Becker, Trade Exhibitions Ltd, tel: 01-262 2886.

**The Great Natural Health and Fitness Show**, July 13-16, Olympia, London. Details from Martin Hump, Swan House Special Events Ltd, tel: 01-783 0055.

**International Pharmaceutical Students Federation** 35th

Congress, August 8-17, Philadelphia, USA. Details from IPSF reception committee, Philadelphia College of Pharmacy and Science, 43rd St & Kingsessing, Philadelphia, PA 19104, USA.

**49th International Congress of Pharmaceutical Sciences (FIP)**, Munich September 4-9, Munich, Germany. Details from secretariat, FIP Congress Dept, Alexanderstraat 11, 2514 JL The Hague (The Netherlands).

**British Pharmaceutical Conference 1989**, September 11-15, Keele. Details from Sidney Southwell, Royal Pharmaceutical Society, tel: 01-735 9141.

**EPoS '89**, September 12-15, Alexandra Palace London. Details from Sue Newman, RMDP, tel: 0273 722687.

**Chemex '89**, September 24-25, Olympia, London. Details from Maurice Hoare, Exhibition Manager, MGB Exhibitions Ltd, tel: 01-302 8585.

**Unichem 1989 Convention**, October 1-8, Paradise Island, Bahamas. Details from Solar Touriste, tel: 01-391 2525.

**18th European Symposium on Clinical Pharmacy**, October 25-28, Nijmegen, the Netherlands. Details from Mr A. Shafford, tel: 0708 46090.

**Institute of Pharmacy Management International**, 25th Annual Conference, October 26-30, Central Park Hotel, Queenborough Terrace, London. Details from Ian Jones, tel: 0274 733466.

**Scan Tech Europe '89**, November 7-9, The Netherlands Congress Centre, the Hague. Details from Sue Newman, RMDP, tel: 0273 722687.

**United Kingdom Clinical Pharmacy Association**, 5th residential symposium, November 24-26, Blackpool. Details from Mike Burden, tel: 0533 55020.

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more professionally active pharmacies. I hope that our renowned personal service to the community will not be sacrificed in the worship of the new god efficiency.

**David Thomas**  
PSNC member, Wolverhampton

## GMSC on nurse prescribing

The article (C&D December 3 p953) which quotes extensively from the GMSC evidence to the Advisory Committee in Nursing Prescribing overlooks some important points.

The ability and authority of nurses to prescribe would be limited by their professional competence, their job descriptions and the protocols agreed with the doctors responsible for treating the patients concerned. The drugs, dressings and appliances mentioned are indicative of the categories from which we believe nurses might prescribe under these arrangements.

Our proposals do not apply to all nurses but only to those who work in the community; district nurses, practice nurses, midwives, school nurses and some specialist nurses, and the authority to prescribe would only apply to those drugs, dressings and appliances for which the particular nurse had approval.

We hope these proposals will lead to closer team work between general practitioners and community nurses and be to the benefit of improved patient care.

**Dr M.A. Wilson**  
Chairman, General Medical Services Committee

## OPD vagaries

Would someone please explain why, according to C&D (December 13, p998), Hoechst are introducing 28-day OPD packs for Daonil etc, while 3M Riker are introducing 30-day packs for Nuelin SA etc.

The only explanation I have come up with is that by confusing all GPs the onset of rational prescribing and consequent reduction in wastage and drug company profits will be delayed.

**Mark Ashmore**  
Stalybridge

# Some Medicines Commission and CSM members have industry interests

Over half the members of the Medicines Commission and the Committee on Safety of Medicines have direct interests in the pharmaceutical industry.

The Medicines Commission annual report 1987 shows that 17 of its 25 members and 12 of the 20 members of the CSM are either paid as consultants or employees of the drug companies or own shares in such companies.

For some years members have followed a code of practice requiring them to declare to the Department of Health any personal interests in the industry. This information is now published for the first time and the annual report for 1988 will also cover the interests of members' departments.

The code acknowledges that it is desirable for members to have a good understanding of the industry's work and that some should have practical experience of the scientific problems of product development. Health Minister David Mellor said recently he had full confidence in the personal integrity of the members concerned.

During the year, the Commission grappled with the vexed question of how to assess the efficacy of homoeopathic medicines. "It seems unlikely that it will prove possible to reconcile conventional assessment criteria with homoeopathic principles which, in the philosophy of homoeopathy, are as important as the active substances," the report says.

The first preference would be for a product licensing system which looked at safety and quality but disregarded efficacy, the Commission suggests. Such a system would not be possible under the Medicines Act as it stands but could be introduced as a result of EC Directives. Failing this, control by manufacturers' licensing should apply, with manufacturing sites subject to inspection by the UK medicines inspectorate.

There is a need to consider whether conventional product licences should be required for potentially hazardous homoeopathic medicines such as ophthalmic products and oral vaccines, the Commission says.

The CSM considered 29 per cent more product licence and clinical trial certificate applications than in 1986. During the first half of the year, licence applications for new active substances were supported by 77 volumes of data on average, compared with 49 volumes over the corresponding

period in 1985.

1987 saw the highest ever annual total of adverse reaction reports. The total of 16,431 was a 5.8 per cent increase over the previous year, and appeared to be a result of better reporting than more dangerous drugs.

The Committee on the Review of Medicines is concerned that the backlog of product licences of right still to be reviewed is not being cleared as rapidly as was hoped initially. "This is due to the poor quality of review submissions and to the continuing shortage of pharmaceutical staff", the report

says. "Despite these difficulties it is intended to complete the review by the EC deadline".

Some 4,500 products remain to be reviewed by May 1990.

In assessing the efficacy of herbal medicines, the CRM is taking particular account of their traditional use. Apart from multi-ingredient products where each ingredient is difficult to justify on these grounds, herbal products meeting acceptable quality and safety standards are not likely to encounter problems if their use is confined to conditions appropriate for self-diagnosis and treatment, says the CRM.



*Vestric's Northern 5-a-side Tournament, in which more than 100 people took part, was hosted by last year winners, Runcorn. For the first time Scotland was represented and the Glasgow Alma Street branch beat Preston 2-0 in the men's final. The winner of the first ladies' tournament was the Speke branch. Ron Vizard, Vestric's financial director turned referee, is pictured presenting the Speke ladies team with the trophy*

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# BUSINESS NEWS

## Park launch award scheme

Park Systems are launching an award scheme for pharmacy students with a view to awarding the top prize of £1,000 at the end of the current academic year.

The scheme will be an annual award on two levels: an award to the best entry from each school of pharmacy, and a prize to the overall winner and his or her school. Details of the award, which has the support of the Royal Pharmaceutical Society and the National Pharmaceutical Association, will be circulated to all 16 schools of pharmacy in the UK.

All final year students will be eligible. The winner from each school will receive a "Park" award of an item (worth about £50). Each school will judge which of its entries is best, and that will go through to the final. The final will be judged by a panel made up of a member of the Society's executive, an NPA official, Jeremy Clitherow, representing community pharmacy and Barrie Strickland-Hodge.

The overall winner will receive £1,000 in cash and the school of pharmacy £250.

Entrants will be asked to research "The public's expectations of a good community pharmacy and which of these expectations are fulfilled and unfulfilled". It will take the form of market research and must stress the degree to which good communications had been achieved by the profession.

## Creighton up

Creighton Laboratories plc are reporting turnover up 69 per cent over the last six months.

Interims to September 30 show sales at £4.5m, up from the £2.7m figure recorded for the same period last year. Pre-tax profits are up by 119 per cent from £341,000 to £746,000.

## Sunday reformers go on the offensive

Mr Timothy Renton, Home Office Minister and the man at the centre of the Sunday trading row, is coming under renewed pressure to scrap existing laws in favour of limited opening hours.

In a poll published last week by the Young Conservatives, 90 per cent of the 165 Tories questioned said they now favour reform.

Mr Renton has said on several occasions that the Government will only act when a consensus exists, wanting to avoid the defeat it suffered in 1986 when a reform Bill was last introduced.

The Shopping Hours Reform Council says the poll demonstrates sufficient agreement now exists. It put forward compromise proposals in December (see C&D December 10, p1013) and has contacted the 91 MPs who voted down the last

Bill. It says: "A significant number of those 91 MPs who were opposed in 1986 have now either left the House or have been satisfied with compromises, like limited opening hours for big stores and the worker protection clause."

The Keep Sunday Special Campaign is rejecting the poll. Campaign manager Brian Wood told C&D that "statistics can be made to prove anything", and that there is still a major split in the Conservative party over the issue. "We'd like to know where they get their consensus from — there is no consensus in the Church, none in Parliament and none among retailers," he said.

A SHRC spokesman said they are now sure Mr Renton will announce reforms in November's Queen's speech.

## Unichem confirm share out

Unichem confirm that the qualifying level of purchases for additional shares during 1989 will be reduced from £7,000 to £3,000 per month. The number of shares to be allocated remains the same at 1.5 million at £1 each.

Peter Dodd, chief executive says "We offered this reduction in qualifying level to the Office of Fair Trading. While they did not accept that it removed their objections to the share scheme, we felt it should be implemented".

Bill Revell, director, AAH Holdings plc, says: "It seems that Unichem has reacted to complaints that its share scheme breached the guidelines issued by the registrar in respect of the conduct of Friendly Societies, by belatedly extending participation to all members. Unfortunately, this increases the anti-competitive implications of the scheme so that the warning contained in the Unichem circular that the MMC investigation may result in an order preventing the issue of further shares, is apposite."

Thames Genelink have changed their name to Cortecs Diagnostics with immediate effect. Cortecs Diagnostics are located in a custom built site on Deeside Industrial Park, North Wales.

## More jobs at Britcair

Britcair are to create 122 new jobs by the end of 1990 following a ten-fold increase in business since Kaltostat became available on prescription.

Mr Robert Browning, marketing director says: "Our products are now widely available and we are delighted at the progress made in the export

market."

The company currently employs 32 people at its manufacturing and research unit in Rhymney, South Wales. The expansion, backed by a grant from the Welsh Office, involves the building of a new 10,000 sq ft facility to house an additional clean room and research laboratories.

## COMING EVENTS

### Monday, January 9

**East Metropolitan Branch, RPSGB.** Churchill Room Wansted Library, Spratt Hall Road, London E11 at 7.30pm. Question time with eminent members of pharmacy profession.

**Southampton Branch, RPSGB.** Southampton General Hospital, at 7.30pm. "Living with a special diet" by Mrs Hamilton-Smith, Duphar Laboratories.

### Tuesday, January 10

**Lanarkshire Branch, RPSGB.** Old Mill Hotel, Motherwell, at 8pm. "Janus looks at diabetes" by Dr K. Paterson, at Glasgow Royal Infirmary.

**Stockport Branch, RPSGB.** Postgraduate Medical Centre, at 8pm. "Computers yesterday, today and tomorrow" by Douglas Davidson MRPharms.

**Leeds & District NPA Branch.** The Mansion Hotel, Mansion Lane, Roundhay, Leeds at 8pm. Pensions and the Financial Services Act. Speaker Brian Dosser, finance officer NPA.

### Wednesday, January 11

**Ayrshire Branch, RPSGB.** Piersland House Hotel, Troon, at 8pm. "Child abuse" by Dr M. Blair, consultant paediatrician. Isle of Wight Branch, RPSGB. Postgraduate Medical Centre, St Mary's Hospital,

Newport at 8pm. Films and videos. **Wembley Branch, RPSGB.** Conference Room 2, Northwick Park Hospital, at 7.30pm. "Science and crime" by Mr A.J. Clathworthy, senior scientific officer, Metropolitan Police.

### Thursday, January 12

**Wirral Branch, RPSGB.** Postgraduate Medical Centre, Clatterbridge Hospital, at 8pm. "Tales of the unexpected" by Dr David Patterson.

### Saturday, January 14

**Dumfries Branch, RPSGB.** Cairndale Hotel, Dumfries, at 7pm. Burns' Supper.



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# ABOUT PEOPLE

## OBEs for pharmacists



Professor Frank Fish, OBE

Professor Frank Fish, former dean of the School of Pharmacy, University of London is awarded an OBE in the New Year Honours. Mr Terry Turner of the surgical dressing research unit, Welsh School of Pharmacy, is awarded an OBE for services to pharmacy in Wales.

Alfred Shepperd, chairman and chief executive of Wellcome, is among those knighted. Other industrialists honoured are the chief executive of the Celltech Group, Mr G.H. Fairtlough and Mr R.F. Norman, managing director of Ciba-Geigy, both of whom become CBEs.

Miss J.E. Fleming, FPS, lately chief administrative pharmaceutical officer for the Greater Glasgow Health Board, is also awarded an OBE.

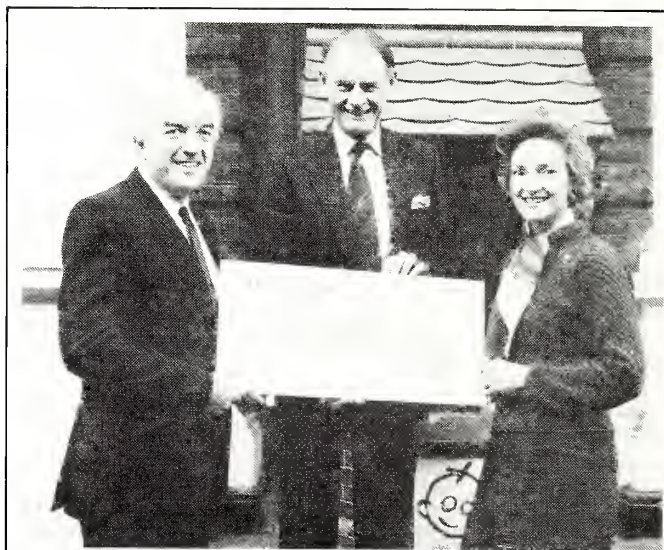
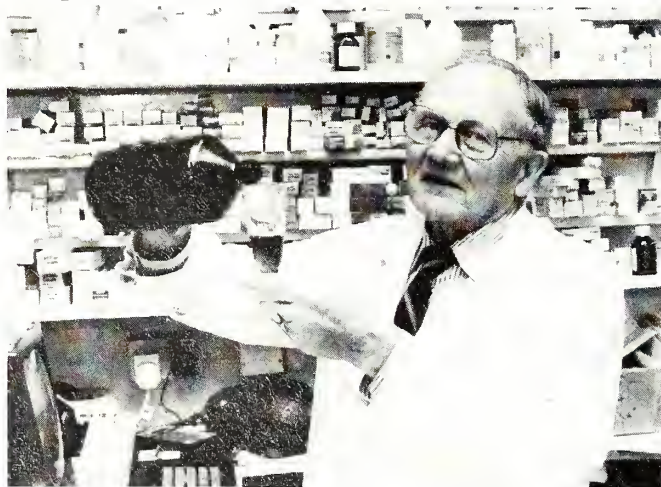
## 50-plus years in pharmacy

John Wyness recently retired from his Walthamstow pharmacy at the age of 79. He purchased the pharmacy in 1937 and celebrated the 50th anniversary in that business with a party at his home in Buckhurst Hill last year.

The shop, trading as Southall (Walthamstow) Ltd, was founded at the turn of the century, but the pharmacy dates back to 1886. During the blitz of the 1940s the

pharmacy and surrounding shops were repeatedly damaged and Mr Wyness recalls many occasions when windows and temporary repairs had to be made.

He is planning to trace old friends and relatives in Scotland and to spend some time relaxing in Dorset, regretting that he is unable to play a good game of golf these days. Mr Wyness registered in 1931.



Kodak have given £50,000 to Great Ormond Street Hospital in response to a national competition in which Kodak donated £0.50 for each entry received. Geoff Cadogan, manager Kodak Photofinishing Division (left), hands over the cheque to Sir Anthony Tippet, the hospital's general manager, and Marian Allford, the "Wishing Well" appeal director

## Flockhart announce winner

The Guild of Hospital Pharmacists has announced the winner of the 1988 Duncan Flockhart Award. It has been won by Mr Darrell Baker, University Hospital of Wales for his publication "A teach

yourself drug calculations booklet for nurses".

The work will be presented and the award made on the morning at a conference on February 3 in London.

## APPOINTMENTS

**Pifco Salton Carmen** have appointed Diane Parsons as sales representative for the Midlands.

**Health & Diet Food Co Ltd** have appointed to the board Michael John Peet as export director and John Birch as sales director.

**Unichem** have promoted Tony Foreman to assistant marketing director.

**Jay Group** have appointed Peter Isaacs as director and general manager, Sunglasses Division. Keith Wallis is made sales manager and Mike Krasny sales executive for Foster Grant.

**LRC Products Ltd** have appointed Peter McLean as general manager (marketing) of Marigold Consumer.

**Amersham International** have appointed Richard D. Lapthorne as a non-executive director. Mr Lapthorne is finance director of Courtaulds and a member of Courtaulds group executive.

**Albright & Wilson** announce that upon the retirement of Mr John P. Diesel, Mr Allen T. McInnes becomes Chairman of the company and executive vice-president of the parent company Tenneco Inc. Dr Philip Oxley becomes chairman, Tenneco Europe Ltd.

**Wellcome Research Laboratories:** Dr Richard J. Taylor, MRPharmS, has been appointed as adviser for new and existing OTC medicines worldwide.



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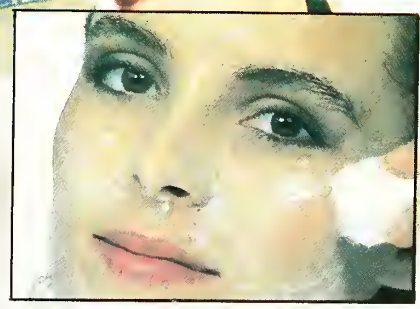
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January 7, 1989

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Rob Darracott, MPS

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Tony Lamb

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Richard Langrish

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£125 to be won in our prize crossword and caption competitions. Your letters, and a familiar face?

# Hello!

Welcome to the first issue of a new monthly supplement to *Chemist & Druggist*. *Over the Counter* is aimed first and foremost at you, the assistant. While *C&D* is still the first place to look for product launches and promotional news, each month you will have your own magazine full of facts and features about the products you sell.

Whether you are behind the medicine or beauty counter, life in a pharmacy is full of customers asking for advice. Each issue of *Over the Counter* will look in detail at a typical problem — this month it's acne — and provide answers for the "Can you recommend something for...?" questions. We shall also be looking alphabetically at all minor ailments, listing the brands available for sale, and highlighting the key points about how they work and giving advice you can and should pass on.

Cosmetics and toiletries provide the subject for our Beauty Basics series. This month's basic skincare feature runs down cleansers, toners, moisturisers and scrubs and suggests regimes for different types of skin.

Background notes on health matters in the news will be coupled with the questions and answers the National Pharmaceutical Association will be sending to your local paper next month, so that you can be on the same wavelength as your customers.

*Over the Counter* might be of benefit to you in other ways too, with £125-worth of prizes available in our crossword and caption competitions this month.

But we also want to hear from you. Tell us what you think, and what you want to see in *your* magazine. And don't forget to look out for the next issue on January 28.



# FOCUS ON ACNE

Community pharmacist Jeremy Clitherow dispels some of the myths and old wives' tales surrounding acne and examines how the extended role of pharmacy personnel can be applied for the patient's benefit

# SPOT ON SOLUTIONS



Acne is an inflammatory disease of the sebaceous glands and ducts which is characterised by blackheads, a greasy skin, lumps, infected spots and scarring.

Most people suffer acne at some time during their life. It rarely occurs in babies, peaks in occurrence in adolescence and diminishes rapidly thereafter. Few sufferers still remain affected in middle age.

Girls tend to develop acne a little earlier than boys. Boys, however, tend to have more severe acne eruptions.

The condition affects mostly the forehead, the face, the shoulders and less so the trunk.

## Clinical appearance

Some 85 per cent of all acne patients have "mild acne". There are multiple spots, some infected, some not, multiple blackheads and an overall greasy appearance to the skin. The eruptions appear and then disappear but may well be aggravated by squeezing or picking into a self-inflicted, localised infection.

Around 10 per cent of acne patients have "moderate acne". The eruptions are more plentiful and larger than in mild acne, often severely infected and involve more than one area. The shoulders and chest are frequently the secondary sites of acne. Skin pockmarks and scarring are infrequent, provided the sufferer does not pick or squeeze.

"Severe acne" affects only 2 per cent of patients. Its extent is greater again than moderate acne.

## Mechanism

Before the treatment of acne can be discussed, the mechanism by which the condition develops needs to be examined. For that, an understanding of the anatomy of the sites affected is essential.

By definition, acne is an inflammatory disease of the sebaceous glands and ducts. The sebaceous glands (see diagram) are the small oil-producing glands attached to the hair follicles. Their function is not altogether clear. It has been suggested that it is a means of lubricating the hair shaft, a means of fat excretion and a method of skin protection.

What is clear is that in the acne patient, three changes take place. Firstly, the lining of the duct becomes inflamed, leading to obstruction; secondly, bacterial colonisation takes place and, thirdly, the quality and quantity of sebum produced by the sebaceous gland alters.

The neck of the gland becomes blocked, the follicle distorts and swells because it cannot discharge its content and a blackhead forms. Blackheads are so called because of the colour of the outer tip of the plug which develops. It is not dirt. Analysis shows it to be the substance responsible for skin pigmentation, namely melanin.

If the blackhead is neglected, the submerged part of the distended sebaceous gland beneath it may leak its contents into the sensitive sub skin, the dermis, thereby causing inflammation. Similarly if the spot is squeezed it may well expel its contents into the underlying tissue and not into the open.



Above: Blackheads typical of adolescent acne. Top: A more severe case involving infection of the blocked ducts. (Photographs courtesy Janssen Pharmacy Division)



Inflammation results immediately.

Scarring and pockmarking may develop if the sebaceous gland does not revert to its original size and shape after an acne episode. Fortunately, the scarring and pitting in most sufferers improves with time.

## Treatments available

All treatments attempt to interfere with the mechanism of development of acne and/or return the skin to its original status.

### Hygiene, with or without other treatments

The first essential is to keep the affected area clean. A simple soap and plenty of clean water, used frequently, will greatly assist in the management of the condition.

Constricting clothes should be avoided to prevent the spread of any infected material which might exude from the lesions.

Alcoholic lotions are available and certainly help. While they make the skin surface feel better, they cannot extract the excess sebum from the site of the problem.

Specialist soaps are available. Many contain antiseptics and detergent. Their use is thus multiple and may prevent the secondary problems of boils, impetigo and spread of infection.

Lotions — either alcoholic or aqueous, medicated or astringent — all have a place in the treatment of acne, but that is not so in the face of the heavy, greasy lotions and ointments of years gone by. They will only make the condition worse.

### Keratolytics and abrasives

A keratolytic dissolves away skin. An abrasive rubs away skin. Both these mechanisms are of use in acne. Referring to the diagram of a blocked sebaceous gland, it can be seen that these actions can assist in the management of acne by unblocking the spot.

Typical keratolytic applications contain salicylic acid in low concentrations and peel away the surface layers of the skin thus opening the follicles, whereas abrasive

applications debrade the skin surface.

Benzoyl peroxide is the most valuable agent in this class and has the added advantage of antibacterial activity. Not only does it loosen the blackhead which is blocking the duct, it releases oxygen and thus provides a hostile environment for the bacterial infection associated with the spot.

Benzoyl peroxide preparations include gels, lotions and creams and may be combined with sulphur and/or hydrocortisone.

### Antibacterials, antiseptics and detergents

These preparations assist hygiene and work by preventing infection of the sites most likely to be affected by the condition. They need to be used regularly and frequently. The compounds used in the formulation of the creams, lotions, gels and washes in this group include hexachlorophene, iodine, quaternary ammonium salts and the quinolines.

### Prescription Only Medicines

Oral antibiotics (tetracycline, erythromycin, minocycline and co-trimoxazole) are often prescribed for long durations at low dose levels. The response is slow and treatment may need to be continue for several years. Lotions of clindamycin have proved to be very effective in some cases of acne.

Anti-androgen preparations may be prescribed, for women, where other therapies have failed to control the condition. They are taken in a dose similar to the Pill.

Retinoic acid preparations reduce the quantity of sebum produced by the sebaceous glands. A disadvantage of this compound is that it is teratogenic — causing abnormalities in developing babies. It is, therefore, essential that effective contraceptive precautions are taken during retinoic acid therapy and for at least one month afterwards.

Ultra violet light, band A, commonly termed UVA, may be prescribed by dermatologists. It has been suggested that the combined peeling effect together with an alteration of the bacterial status of the skin is the route. It is not certain.

## Counter assistant's role

Patients asking for help with acne treatment need both products and advice. Improvement in the condition increases dramatically if the patient can be persuaded to become actively involved in the treatment. For pharmacy assistants faced with any inquiry from a patient for an over the counter product, the first question must always be "Are you taking any other medicine?" While it may seem a strange question to ask someone inquiring about acne preparations, it is not uncommon for drugs taken orally to affect the skin.

If the answer to this question is "yes", think about consulting the pharmacist to advise. If the answer is "no", next take a good look at the patient. Is he or she in a high risk category for acne? How old are they?

If they are not teenagers or young adults with greasy skin they may have some other more serious skin problem. Think again about consulting the pharmacist. If they are typical acne sufferers, you can outline the treatments available, not forgetting the importance of basic hygiene.

Advise customers to wash the skin regularly with soap and water and dry vigorously with a rough towel. This removes oil and dead skin and helps break up blackheads. This can be followed by a cleansing lotion, and, for more extensive cases, by one of the many topical OTC products. Customers will need to be reassured that these treatments can take weeks or months to produce a marked improvement, so they should be used regularly for some time to give a fair trial.

Girls should be advised to avoid greasy make-up as it will clog the pores. Make-up used for camouflage should be medicated or formulated for use on a greasy skin.

## Summary

■ Acne is an inflammatory disease of the sebaceous glands and ducts, occurring mainly in adolescence.

■ Typical signs are greasy skin, blackheads and spots. Squeezing or picking can lead to scars.

■ The first essential in treatment is to keep the affected area clean; special soaps and cleansing lotions may help.

■ Keratolytics like benzoyl peroxide or salicylic acid help unblock the ducts by peeling away the surface layers of skin. These can irritate the facial skin, which is much softer than other skin, so it is wise to start with a lower strength product first. Keratolytics should always be used with caution.

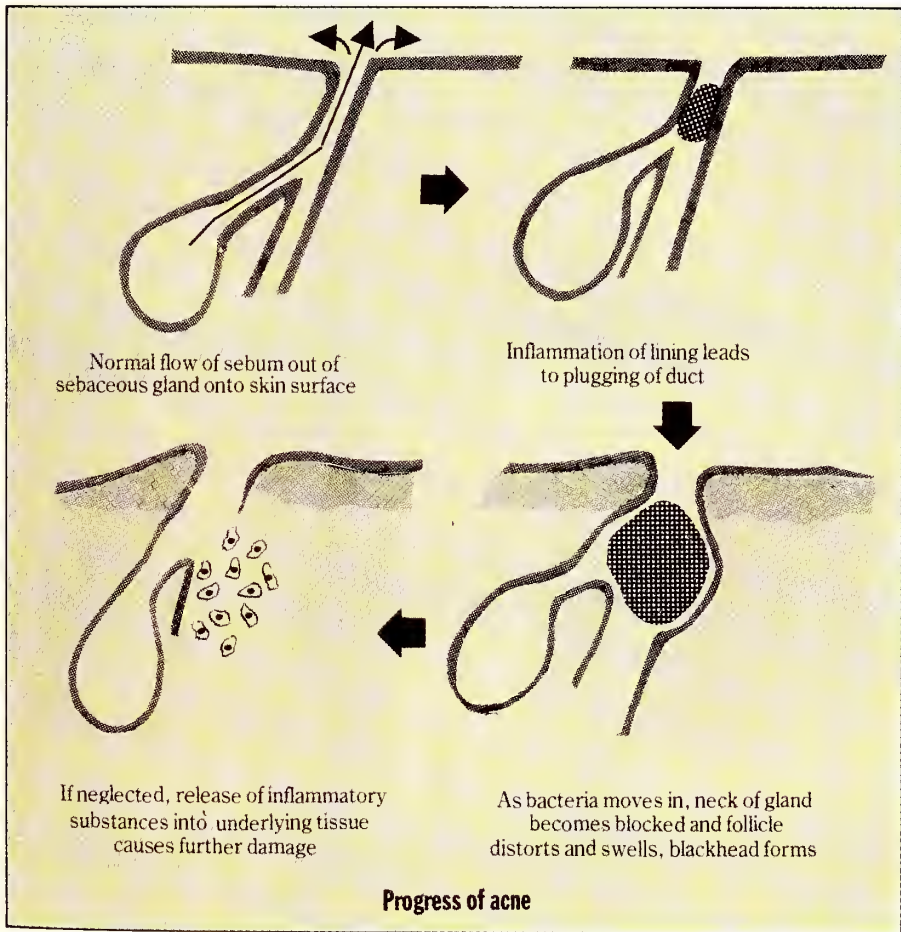
■ Antibacterials, antiseptics and detergents help with hygiene and prevent infection.

## Action

Look at the acne products on the shelves in your pharmacy. Our compiled list of OTC acne products on pages 8, 10 and 11 of this issue of *Over the Counter* will help you familiarise yourself with the ingredients of those lines you stock.

Consider the treatment you might advise for the mild case of acne in the large picture. And what products might be used in the more severe case in the small picture. You may like to discuss with your pharmacist how you should approach patients seeking advice. The NPA Training Manual is another useful reference.

Remember, many of the OTC products are Pharmacy only, so can only be sold under the pharmacist's supervision.



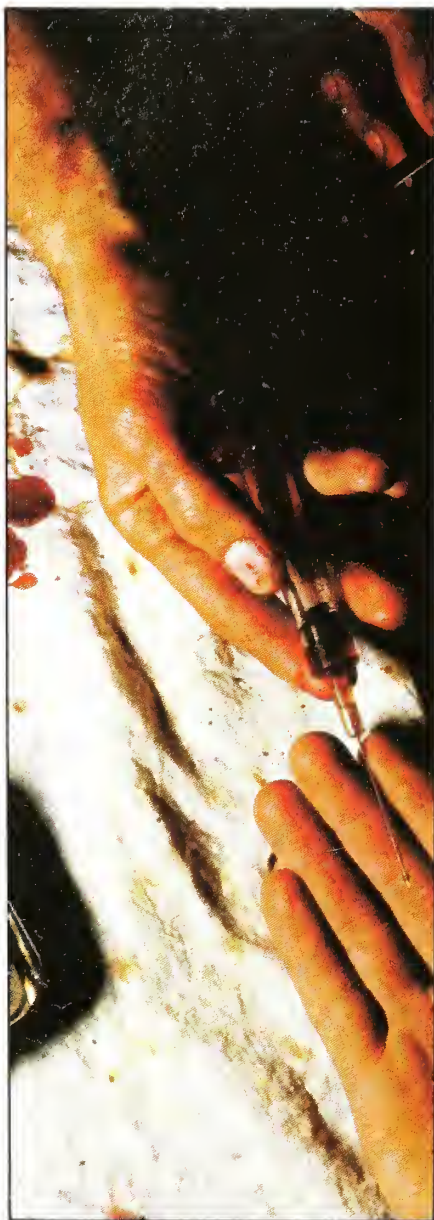
Progress of acne



# Factfile

**What exactly is AIDS? Is it never too late to give up smoking? Confused by all the media messages?**

**Read on . . .**



## Subject: AIDS

1. AIDS stands for acquired immune deficiency syndrome. It is caused by a virus called human immunodeficiency virus (HIV) which attacks the defence system, making people vulnerable to illnesses they would normally be able to fight off. Most die as a result. The latest figures, up to the end of November, are 1,926 cases, 1,035 deaths.
2. Two illnesses commonly found in AIDS patients are Kaposi's sarcoma — a rare form of cancer, mainly of the skin — and *Pneumocystis carinii* pneumonia, a serious infection of the lungs.
3. Infected people can pass on the virus through sexual contact — vaginal or anal intercourse — or if their blood gets into another person's body. Babies can also be

infected by the mother before or during birth or from breast milk.

4. It can take several years between catching the virus and developing AIDS.
5. Normal everyday contact with an infected person is safe. The virus does not live long outside the body and cannot be transmitted in the air or by touch. While the virus cannot be caught by touching objects used by an infected person such as cutlery, towels, toilet seats etc, it's wise not to share razors or toothbrushes (because many people's gums bleed when they brush their teeth.).
6. There is no cure for AIDS and there is no vaccine to prevent people from catching the virus.
7. The best action is to avoid getting the virus. The more sexual partners a person has, the greater the risk. Using a condom during sex reduces the risk. Anyone can catch the virus, although at present most people infected are homosexuals and injecting drug abusers.
8. Drug misusers should not inject drugs but, if they do, equipment must not be shared.
9. A blood test called the HIV antibody test shows if a person has been in contact with the virus and developed antibodies to it. The test cannot predict whether that person will go on to develop AIDS. Anyone wanting the test should ask a GP or go to any STD (sexually transmitted disease) clinic.

## Subject: Anti-Smoking

1. A third of all adults are regular smokers. Despite widespread knowledge of the dangers of smoking, and an overall decline in the number of smokers, the proportion of people taking up the habit is on the increase in some groups, notably teenage women.
2. It is estimated that over 100,000 people will die in the UK in 1989 as a result of a smoking-related disease. In a large town — 250,000 people — 500 will die in a year through smoking, while 40 will be killed on the roads.
3. The three main diseases associated with smoking are lung cancer, chronic bronchitis and coronary heart disease, but other

cancers, notably of the mouth, tongue, voicebox, pancreas, bladder, cervix and penis, and ulcers, strokes and even leukaemia are all more common in smokers. In pregnancy, mothers who smoke are more likely to have low birthweight babies.

4. There is good evidence that passive smoking — inhaling other people's smoke — increases the risk of disease. Some 200 non-smokers every year may develop lung cancer through passive smoking.
5. 40 per cent of heavy smokers will not live to enjoy retirement.
6. The harmful substances in cigarette smoke include habit-forming nicotine, tars, irritants and carbon monoxide.
7. Only 2 per cent of smokers are glad they smoke and up to two-thirds would like to stop.
8. As soon as a smoker stops smoking, the risk of development of cancer starts to drop. After 10 years, the ex-smoker is no more likely to get cancer than a lifelong non-smoker. Stopping smoking also benefits chronic bronchitis.
9. Financial savings can be enormous. Twenty a day costs £500 a year. Food will taste better, clothes and breath will smell more pleasant.
10. For someone wanting to give up: choose a day to give up and stick to it — "cutting down" gradually rarely leads to giving up completely. Get help from family and friends — their support is invaluable. Try and avoid situations where you are likely to indulge. Get rid of ashtrays, lighters and so on the day before you give up.
11. The irritability, stomach upsets, coughs and so on that may follow giving up will pass.
12. An anti-smoking aid may help. Over the counter Nicobrevin is said to prevent some of the symptoms of withdrawal. Tabmint and Giv-up make smoking unpleasant.
13. A nicotine chewing gum, available on prescription, when used with counselling and support, has a good rate of success, with the best response coming when used by stop smoking clinics. Over the counter products like Stoppers and Stubit, which contain various tobacco extracts, may work in the same way.
14. 99 per cent of ex-smokers have given up without outside help.





To remove tablet press corner of plastic bubble  
pushing tablet out through aluminium foil

# Rennie

24  
tablets

Digestif

**Rennie** relieves acid indigestion, heartburn, nervous indigestion, acidity, flatulence, upset stomach, dyspepsia, or biliousness.

**DOSAGE:** two tablets to be sucked or chewed as required. Repeat whenever discomfort is felt to a maximum of sixteen tablets a day.

If symptoms persist consult your doctor.  
**KEEP OUT OF THE REACH OF CHILDREN**

Each tablet contains Calcium carbonate 680 mg  
Light Magnesium Carbonate Ph Eur 80 mg

Store at room temperature (15° to 25° C)

Nicholas Laboratories Limited, Slough SL1 4AU

PL 0188/5901

Digestif Rennie Regd. Trade Mark  
CY ML No. 5352



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19

Digestif  
**Rennie**

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24  
tablets

Digestif

# Rennie

Digestif  
**Rennie**



Digestif

# Rennie

Expiry Date

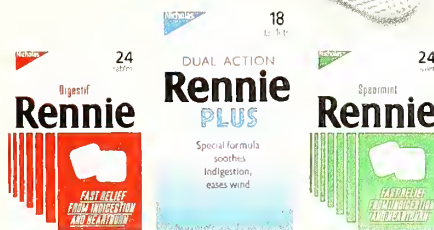
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Which could be caused by not  
stocking enough of the brand  
leader's newly designed packs.

Let's face it, Rennie and  
Rennie Plus are about to  
spend £2 million on Press  
and T.V. Advertising.



**GOT ANY RENNIE?**  
*enough*



# Acne

Most topical preparations for acne are intended for removing blackheads and reducing the numbers of bacteria on the skin. Management involves cleansing with soap and water — some specialists soaps are available — or alcoholic or water-based lotions. Keratolytics, like sulphur and benzoyl peroxide, and abrasives, like aluminium oxide, dissolve or rub away the skin to unblock spots, while antibacterials and antiseptics assist hygiene and prevent infection of the affected sites.

## Acetoxyl 2.5 and 5

Ⓟ

Stiefel Laboratories

*Aqueous acetone gel base containing benzoyl peroxide 2.5 per cent or 5 per cent. White base; invisible and non-greasy when applied*

Acne vulgaris

Apply to the affected area once daily after washing

**Caution:** Keep away from mouth, eyes and mucous membranes. May bleach dyed fabrics.

2 per cent: 40g tube **£2.74**. 5 per cent: 40g tube **£3.04**

## Acnaveen

DDD

*Cleansing bar containing sulphur 2 per cent, salicylic acid 2 per cent in natural oatmeal base; pH5*

Greasy skin

Use instead of soap for washing and cleansing skin  
75g **£1.29**

## Acne Aid Soap

Ⓟ

Stiefel Laboratories

*Soap of high molecular weight fatty acids and detergents with 6.3 per cent sulphated surfactant blend. No perfume, colour, filler or other additives.*

Acne and other greasy skin conditions

Make lather with warm water, massage into affected areas, rinse and repeat as necessary

**Caution:** Avoid eyes; flush with water if lather enters eyes. If



irritation occurs discontinue use and consult doctor or pharmacist.  
100g **£1.55**

## Acnegel and Acnegel Forte

Ⓟ

Stiefel Laboratories

*Gel base containing 5 or 10 per cent benzoyl peroxide with colloidal magnesium aluminium silicate, hydroxypropylmethyl cellulose, ethyl alcohol, polyoxyethylene lauryl ether, citric acid and purified water*

Acne vulgaris

Apply to affected areas once daily, after washing

**Caution:** Keep away from eyes and other mucous membranes. May bleach dyed fabrics

5 per cent: 50g **£3.75**. Forte (10 per cent) 50g **£4.10**

## Acnidazil

Ⓟ

Janssen Pharmaceutical

*Odourless, non-greasy, vanishing cream containing benzoyl peroxide 5 per cent, miconazole nitrate 2 per cent*

Spots and acne

Thin layer should be applied once daily (evening) during the first week and twice daily (morning and evening) thereafter. Washing with mild soap and lukewarm water before application enhances efficacy. Patients with widespread facial acne should apply only to small area for first few days

**Caution:** May bleach dyed clothing  
Tube 15g **£2.99**

## Benoxyl 5 and 10

Ⓟ

Stiefel Laboratories

*White cream containing 5 per cent benzoyl peroxide. Lotion containing 5 or 10 per cent benzoyl peroxide.*

Acne vulgaris

Apply to affected area once daily after washing

**Caution:** Keep away from eyes, mouth and other mucous membranes. May bleach dyed fabrics

Cream 40g 5 per cent **£2.23**.

Lotion 30ml 5 per cent **£1.78** 10 per cent **£1.88**.

**Benoxyl 5 with sulphur**

*White cream containing 5 per cent benzoyl peroxide with 2 per cent sulphur*  
40g **£2.40**

**Benoxyl 10 with sulphur**

*White cream containing 10 per cent benzoyl peroxide with 2 per cent sulphur*  
40g **£2.57**

## Benzagel 5 and 10

Ⓟ

Bioglan Laboratories

*White gel containing micronised benzoyl peroxide 5 or 10 per cent*

Acne

Wash affected areas with soap and water, dry and apply gel

once or twice daily

**Caution:** Avoid contact with clothing and fabric. Keep away from the mouth, eyes and other mucous membranes

Tube 40g 5 per cent **£3.43**. 10 per cent **£3.73**

## Betadine Skin Cleanser

Napp Laboratories

*Golden brown solution containing 4 per cent povidone iodine*

Acne vulgaris of the face and neck

Apply directly or with moistened sponge to the affected area and work up to rich lather. Allow to remain on skin for three or five minutes, then rinse off thoroughly with warm water  
250ml around **£3**

## Betadine Scalp & Skin Cleanser

*Golden brown solution containing povidone iodine 7.5 per cent*

Acne vulgaris

Apply directly or with moistened sponge. Cleanse thoroughly, repeat application and dry with clean towel

250ml around **£3.55**

## Biactol Liquid

P&G Health and Beauty

*Pink, antibacterial facewash containing sodium lauryl ether sulphate 2.6 per cent, phenoxypopropanol 2 per cent*

For deep cleansing of skin prone to spots

Wash morning and night using instead of soap. Work into a lather, rinse thoroughly with warm water then cold. Pat dry with clean towel

**Caution:** Not to be used on infants  
Plastic bottle 75ml **£1.49**. 150ml **£2.59**.

250ml **£3.99**

## Brasivol

Stiefel Laboratories

*Cream-coloured abrasive cleansing paste containing particles of fused synthetic aluminium oxide in three grades (fine, medium, coarse) in a non-irritant soap detergent base.*

Acne vulgaris

Start with Brasivol no 1 (fine).

Apply to wetted skin and rub gently but firmly over affected area with circular motion for 30 second then rinse. Repeat one to three times daily replacing soap and water. In more severe conditions, after several weeks, the skin may require the more abrasive no 2 and then no 3.

**Caution:** Discontinue if undue irritation occurs  
No 1 70g **£4.30**. No 2 80g **£4.30**. No 3 100g **£4.30**.

## Cepton Gel

Care Laboratories

*Clear gel containing 2.5 per cent chlorhexidine gluconate solution BP*

Treatment of spotty acne  
Apply thin coating directly onto spot

**Caution** Keep away from eyes  
Tube 30g **£1.75**

**Cepton Lotion**

*Pale blue liquid containing 0.5 per cent chlorhexidine gluconate solution BP*  
150ml bottle **£2.15**

**Cepton medicated skin wash**

*Pink liquid containing 5.9 per cent chlorhexidine gluconate solution BP*  
100ml **£1.35** 250ml **£2.65**

## Remember

Products containing benzoyl peroxide may bleach fabrics.

Over the counter hydrocortisone creams and ointments should not be used in acne and should not be sold for this purpose.



## Clearasil

### P&G Health and Beauty

*Colourless or skin-tinted cream containing triclosan 0.1 per cent, precipitated sulphur 8 per cent*  
Spots and blackheads  
Wash affected area with a medicated soap. Spread over problem areas, especially where skin is oily, or directly on to spots. Repeat morning and night  
**Caution:** If skin becomes inflamed discontinue and consult a doctor or pharmacist. Do not apply to mouth or around the eyes. May discolour jewellery  
Tube 25g **£2.19**

**Clearasil medicated cover stick**  
*Pink-coloured twist-up stick containing cosmetic brown pigment, titanium dioxide as covering agent with bentonite to absorb sebum, and antibacterial agents in wax base*  
Cover for spots, blackheads and blemishes  
**Caution:** Avoid contact with eyes. May discolour jewellery  
**£1.99**

**Clearasil lotion**  
*Blue liquid, containing alcohol, a detergent, cetrimide and chlorhexidine gluconate*  
For greasy skin  
**Caution:** Avoid contact with eyes  
50ml **£1.19**. 100ml **£2.07**

**Clearasil milk**  
*Liquid containing alcohol and a surfactant, with ergosan*  
**Caution:** Avoid contact with eyes  
50ml **£1.19** 100ml **£2.07**

**Clearasil soap**  
*Pink tallow coconut soap bar containing ergosan*  
100g **£0.69**

## Compound sulphur lotion BNF

*Precipitated sulphur 4 per cent, quillaia tincture 0.5 per cent, glycerol 2 per cent, industrial methylated spirit 6 per cent, calcium hydroxide solution to 100ml*

## Eskamel

### Smith, Kline & French

*Cream containing resorcinol 2 per cent and precipitated sulphur 8 per cent*  
Acne  
Wash affected areas with soap and water and dry carefully. Apply Eskamel thinly but do not rub in. Use once daily, more often if skin very oily  
**Caution:** Existing skin infection. Care on inflamed areas or near eyes and mouth. Redness and scaling in patients with fair skin  
Tube 25g **£1.03**

## Harrogate Sulphur Soap

### Townendale

*Tablets of sulphur-containing soap*  
100g **£0.86**

## Ionax Scrub

### Alcon Laboratories

*Pale yellow semi-translucent gel, with fresh lemon odour, containing polyoxyethylene (4) lauryl ether, polyoxyethylene (23) lauryl ether, benzalkonium chloride solution, ethyl alcohol (denatured), polyethylene granules*  
Abradent cleanser for control of acne  
Apply to wet face. Massage for one or two minutes then rinse thoroughly. Use once or twice daily  
**Caution:** Avoid eyes. On accidental contact, flush with water and avoid rubbing. If skin gets too dry or too reddened discontinue use temporarily.  
60g **£2.14**

## Nericur

### Schering Health Care

*Aqueous white gel containing 5 or 10 per cent benzoyl peroxide*  
Acne vulgaris  
Wash with soap and water, then dry. Apply to affected areas once daily. For stubborn cases treatment may be continued with Nericur 10 per cent  
**Caution:** Avoid contact with mouth, eyes and other mucous membranes. May bleach dyed fabrics  
30g tube 5 per cent **£2.18**  
10 per cent **£2.40**

## Oxy 5 and 10

### Beecham Health Care

*White lotion containing benzoyl peroxide 5 or 10 per cent*  
Spots and acne  
Wash and dry affected areas. Apply and massage gently until lotion disappears. Wash hands. With fair or sensitive skin apply cautiously for first few days to avoid redness and peeling. For first week apply once daily. If no irritation or discomfort, apply twice daily  
**Caution:** Avoid contact with eyes, lips and mouth. May bleach fabrics. If redness and peeling are excessive, decrease quantity and frequency of application. If reaction persists, see a doctor. Do not use continuously for more than 3 months (Oxy 5) or 2 months (Oxy 10)  
30ml 5 per cent **£2.59** 10 per cent **£2.99**

### Oxy Clean Facial Scrub

*Clear gel containing dissolving granules, with sodium borate and triclosan*  
75ml **£2.09**

### Oxy Clean Facial Wash

*Blue cleansing gel containing triclosan 0.3 per cent*  
120ml **£2.09**

### Oxy Clean Medicated Cleanser

*Blue cleansing lotion containing triclosan 0.2 per cent, salicylic acid 0.5 per cent, ethanol 40 per cent*

**Caution:** Flammable  
100ml **£2.09**

### Oxy Clean Medicated Cleansing Pads

*Medicated pads soaked in blue cleansing lotion containing triclosan 0.2 per cent, salicylic acid 0.5 per cent, ethanol 40 per cent*  
50 **£2.09**

## Panoxyl 5 and 10

### Stiefel Laboratories

*5 or 10 per cent benzoyl peroxide in a gel base with colloidal magnesium aluminium silicate, hydroxypropylmethyl cellulose, ethyl alcohol, polyoxyethylene lauryl ether, citric acid, purified water*  
Acne vulgaris  
Apply to affected areas once daily after washing  
**Caution:** Keep away from eyes and other mucous membranes. May bleach dyed fabrics  
40g 5 per cent **£2.48**. 10 per cent **£2.81**

### Panoxyl Aqua Gel

*White, viscous aqueous gel containing 2.5, 5 or 10 per cent benzoyl peroxide*  
Apply once daily after washing  
**Caution:** Use with care when applying to neck and other sensitive areas  
40g 2.5 per cent **£2.97** 5 per cent **£3.31** 10 per cent **£3.66**

## Phisoex System — Phiso-Ac Medicated Cream

### Sterling Health

*Flesh-tinted "greaseless" cream containing colloidal sulphur 6.4 per cent, resorcinol 1.5 per cent*  
Spots and acne  
Wash affected areas. Gently apply cream once or twice a day depending on the severity of the condition  
**Caution:** In severe persistent cases consult a doctor  
20g **£1.99**

### Phisoex Medicated Lotion

*Clear liquid containing salicylic*

## Remember

This section contains only topical preparations. They are all **For external use only.**

Ⓟ denotes that a product is **Pharmacy only** and can only be supplied under the supervision of a pharmacist.

*acid 0.5 per cent*  
Used regularly to encourage fresher, healthier skin  
Cleanse face using a pad of cotton wool moistened with the lotion. For best results use night and morning  
113ml **£1.99**

### Phisoex Medicated Face Wash

*White liquid containing triclosan 0.5 per cent*  
Prevention of spots  
Wet skin. Spread a few drops of liquid on the palm of the hands. Apply to face massaging gently. Rinse with warm water and towel dry. Use morning and night  
150ml **£2.65**

## Quinoderm Cream

### Quinoderm

*Creamy white astringent vanishing cream containing benzoyl peroxide 10 per cent, potassium hydroxyquinoline sulphate 0.5 per cent*  
Acne vulgaris, acne rosacea, acneform eruptions, acne varioliformis, impetigo, sycosis barbae, folliculitis  
Gently massage over all the affected area two or three times daily  
**Caution:** May adversely affect dyed fabrics  
25g **£1.69** 50g **£2.83**

### Quinoderm cream 5

*As above but containing benzoyl peroxide 5 per cent, potassium hydroxyquinoline sulphate 0.5 per cent*  
Acne vulgaris, acneform eruptions, folliculitis  
50g **£2.54**

### Quinoderm Lotion-gel

*Homogeneous astringent gel formulated to give the colour and consistency of a creamy white lotion containing benzoyl peroxide 10 per cent, potassium hydroxyquinoline sulphate 0.5 per cent*  
Acne  
Gently massage over the affected area one to three times daily  
30ml **£2.35**

### Quinoderm Lotion-gel 5 per cent

*As above but containing benzoyl peroxide 5 per cent, potassium hydroxyquinoline sulphate 0.5 per cent*  
30ml **£2.19**

## Resorcinol and sulphur paste BP

*Resorcinol 5 per cent, precipitated sulphur 5 per cent, zinc oxide 40 per cent, emulsifying ointment 50 per cent*

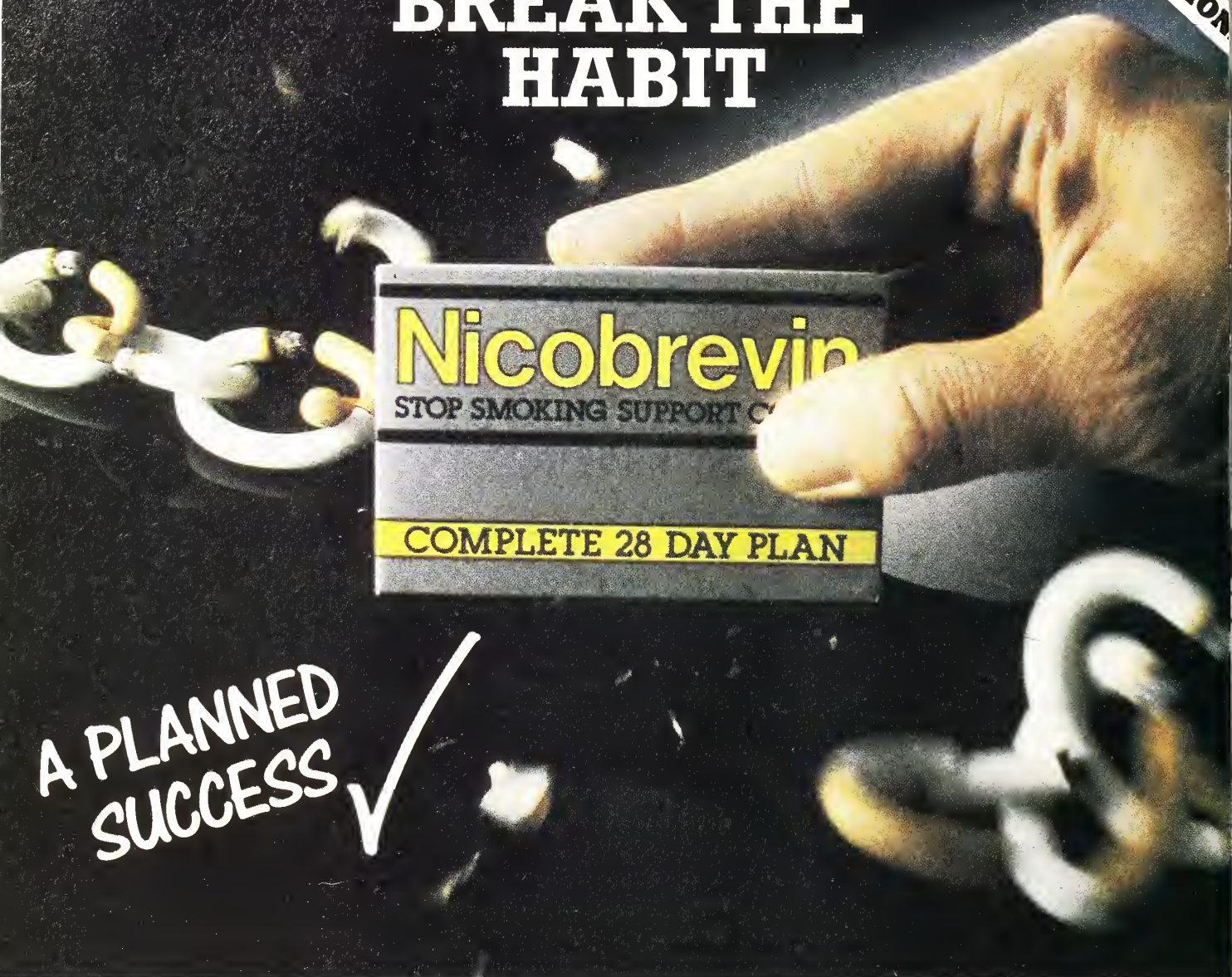
## Salicylic acid and sulphur cream BP

*Salicylic acid 2 per cent, precipitated sulphur 2 per cent in aqueous cream*



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**and no prescription is required.**

(1) Brit. J. of Clinical Practice Sept. '88. Conclusions:-

**'Nicobrevin is significantly superior to placebo as an aid to stopping smoking'**

**'Significantly more patients rated their treatment as very effective in the active (Nicobrevin) group'**

**BREAK THE HABIT WITH NICOBREVIN**



Building Brands for you and your Customers

COUNTER PRESCRIBING FACT SHEET PRESENTATION: Gelatine capsules containing Menthyl Valerate 100mg, Quinine BPC 1963 15mg as the active ingredients. Other ingredients are Camphor and Oil of Eucalyptus. USES: Nicobrevin is an anti-smoking preparation, presented as a full 4 week course. PRINCIPAL ACTION: Nicobrevin is designed to provide therapeutic support for people trying to give up smoking. Nicobrevin 'eases' the withdrawal syndrome and 'cushions' the residual effects of smoking. Quinine reduces the craving for tobacco by slowing down the metabolism of nicotine already present in the system. Due to its anorexic effects Quinine also helps to neutralise the craving for food. Menthyl Valerate counteracts the irritability and anxiety associated with giving up smoking. RECOMMENDED DOSAGE SCHEDULE: Nicobrevin capsules should be swallowed whole with a little water. The course is started in the evening and should proceed as follows: First evening before retiring: 2 capsules; 2nd-7th morning on an empty stomach: 1 capsule; 2nd-7th evening before retiring: 2 capsules; 8th-14th morning on an empty stomach: 1 capsule; 8th-14th evening before retiring: 1 capsule; 15th-28th evening before retiring: 1 capsule. CONTRA-INDICATIONS, WARNINGS etc: Warning: Do not exceed the stated dose. Use in pregnancy: The use of Nicobrevin during pregnancy is not recommended. PHARMACEUTICAL PRECAUTIONS: Nicobrevin capsules should be stored in a cool, dry place. LEGAL CATEGORY: P. PRODUCT LICENCE HOLDER: MILLER OF GOLDEN SQUARE LIMITED. PRODUCT LICENCE NUMBER: 0274/0002R. DISTRIBUTOR: Sole distributor of Nicobrevin Capsules in the U.K. is INTERCARE PRODUCTS LTD., WOKINGHAM.

"Nicobrevin" is a registered trade mark



**Salicylic acid and sulphur ointment BPC 1973**

Salicylic acid 3 per cent in hydrous ointment (oily cream)

**Sulphur ointment BP**

Precipitated sulphur 10 per cent in white simple ointment

**Theraderm 5 and 10** (P)

**Bristol-Myers**

White, water-based 5 per cent gel containing benzoyl peroxide 5 per cent or 10 per cent

Acne vulgaris  
After washing with soap and water apply once or twice daily to the affected area

**Caution:** Avoid eyes and mouth. May bleach coloured fabrics. Discontinue if irritation is severe. 56g 5 per cent **£3.48**  
10 per cent **£3.64**

**Topex** (P)

**P&G Health and Beauty**

White cream or lotion containing benzoyl peroxide 5 per cent

Spots and acne  
Wash and apply once daily in first week, twice daily thereafter. Discontinue if no effect within 4 weeks.

**Caution:** If undue itching, redness, burning or swelling occur stop

**Remember**

With many acne creams, some skin irritation is to be expected due to the skin peeling (keratolytic) effect. Treatment should stop if this irritation, redness or peeling is excessive.

Acne treatment should generally be started with lower strength preparations.

Prices in this section are correct at time of going to Press, for latest packs and prices see C&D Price Service.

Over the counter hydrocortisone creams and ointments should not be used in acne and should not be sold for this purpose.

use. See doctor if symptoms persist. Do not use for longer than 3 months. Keep away from lips, eyes and mouth. May bleach coloured fabrics  
Lotion 30ml, cream 20g **£2.99**

**Torbetol** (P)

**Torbet Laboratories**

Clear blue lotion containing cetrimide 0.7 per cent, hexachlorophane 0.75 per cent, benzalkonium chloride solution 0.1 per cent

Acne vulgaris, teenage spots, acneform eruptions  
Apply with cotton wool to the affected areas and allow to dry. Repeat up to three times daily  
**Caution:** Not to be used for babies. Discontinue if skin irritation occurs. Avoid contact with eyes, lips and mouth  
50ml **£1.96**

**Triac**

**Ciba Consumer**

Gel containing ethyl lactate 10 per cent, zinc sulphate 0.3 per cent  
Wash the whole face and any other affected areas. Apply with cotton wool with a gentle, circular motion. Do not wash off. Repeat at night and morning.

**Caution:** Avoid contact with eyes. Wash hands after use. If irritation occurs, discontinue use.  
30ml **£2.95**

**Valderma**

**Reckitt & Colman**

White, smooth, non-greasy cream containing potassium hydroxyquinoline sulphate 0.2 per cent, chlorocresol 0.2 per cent

Spots and other minor skin problems  
Cleanse with warm water and an antibacterial soap. Rub in cream. Repeat two or three times daily but especially night and morning  
Tube 30g **£1.07**. 45g **£1.33**

**Valderma soap**

Blue soap indented with "Valderma" on both surfaces, containing trichlorocarbanilide 1 per cent  
100g **£0.62**

**Anti-smoking**

A number of products are available over the counter to help smokers kick their habit. According to addiction experts many have not been properly evaluated, but the placebo response can be a powerful influence in smokers wishing to give up.

Products divide up into those which make smoking distasteful by producing a bad taste; others are said to aid the user over the withdrawal period.

**Cantassium Anti-smoking Herbal Remedy**

**Larkhall Laboratories**

Brown, mottled, oval film-coated tablets each containing 65mg lobelia herb, 20mg kola herb, 25mg quassia powder  
To help stop smoking  
One to two tablets with water when craving a smoke. No more than eight tablets in 24 hours  
60s **£1.45**

**Giv-up**

**M&D Marketing**

Blue mouthwash containing 0.2 per cent silver acetate  
Produces a nasty taste if user attempts to smoke  
Each rinse lasts for five to six hours  
**Caution:** Do not swallow. Remove dentures before rinsing  
500ml **£12.99**

**Nicobrevin** (P)

**Intercare Products**

Clear, tasteless, gelatine capsules containing light yellow tinted liquid. Each capsule contains menthyl valerate 100mg and quinine 15mg  
Stop smoking support  
A 28 day course gradually reducing numbers of capsules.  
**Caution:** Do not exceed stated dose. Not recommended during pregnancy  
48 capsules (28 day course) **£9.45**

**Potter's Anti-Smoking Tablets**

**Potter's (Herbal Supplies)**

Olive green tablets, each containing lobelia herb 32.5mg in a mildly flavoured base  
Herbal remedy to reduce addiction to tobacco smoking  
One or two tablets to be taken every two hours. Each tablet should be sucked for 30 seconds, then swallowed whole  
75s **£1.99**

**Stoppers Lozenges**

**Leo Laboratories**

Brown lozenges each containing 0.75mg purified tobacco with additional flavouring of cocoa, peppermint, aniseed and liquorice  
As an alternative to smoking a cigarette in order to reduce consumption  
Allow lozenge to dissolve slowly (do not suck) between gums and cheek when need for a cigarette is felt  
Plastic flip-top container 30 lozenges **£1.55**

**Stubit**

**Pickles**

Flavoured lozenges each containing 0.7 per cent purified nicotine  
To help stop smoking cigarettes  
Dissolve one lozenge between cheek and gum when required  
**Caution:** Do not chew or swallow whole  
30 lozenges **£1.20**

**Tabmint** (P)

**Fisons Consumer Health**

White, coated and polished, rectangular, mint-flavoured chewing gum tablets each containing 6mg silver acetate  
Anti-smoking chewing gum  
Chew as required one or two pieces for at least 15 minutes before smoking. Maximum daily dose not to exceed six pieces. Maximum duration of use not to exceed four weeks  
**Caution:** Do not take during pregnancy or when breast feeding. People with dentures may experience some difficulty in chewing the gum  
12s **£2.35** 60s **£9.35**

**TORBETOL™ ACNE LOTION**

**THE PROFESSIONAL TREATMENT FOR ACNE, SPOTS & PIMPLES**

Available in bottles of 50ml from your Wholesaler now

MACARTHY MEDICAL PIP CODE 328-666. VESTRIC LINK CODE TOR 18H  
UNICHEM PROSPER CODE 933-168



If you experience any difficulty in obtaining supplies please contact



**TORBET LABORATORIES LTD**  
MAIDSTONE KENT ME15 9QQ  
TEL 0860 319350



# BEAUTY BASICS

Good skincare is a beauty essential for women of all ages, but you need to know what you're selling and why. So what are the basic skincare products and what do they do? Who needs them, and how can you help your customers get the best from what they buy?

## Face the facts

The aim of basic skincare is to keep skin looking soft and glowing, and feeling smooth and supple. There are literally hundreds of different products for these purposes, but whatever kind your customers prefer, the basic skincare routine is the same: cleansing, toning and moisturising daily, topped up with special treatments, such as facial scrubs and face packs, once or twice a week. The products you recommend for these routines will depend on the customer's budget, their personal preferences, and, most of all, their skin type and its special needs.

### Skin types

**Dry skin** tends to look dull, and shows up wrinkles strongly. It often feels taut after washing, and may flake, scale and chap easily. It has a fine, close texture, and pores are usually unnoticeable. Dryness is most common in older skins, as production of sebum, the skin's natural moisturiser, declines, but it can occur at any age.

**Oily skin** feels soft and supple, but looks shiny and may be prone to spots. It has a coarse texture and large open pores. It's most common during the teenage years and often settles down again during the twenties.

**Normal skin** is naturally clear, soft and supple, not prone to blemishes nor sensitive to external influences.

**Combination skin** is the most common type. The central "T-zone" on the face — forehead, nose and chin — is oily, and the cheeks dry or normal.

**Sensitive skin** is a term that covers two conditions: delicate, dry skin that's easily irritated by harsh substances or extremes of temperature; and skin that's prone to allergic reactions to cosmetics or other substances.

Easily irritated skin tends to be fair and dry, but allergic reactions can happen on any skin type. The two conditions sometimes exist side by side.

It's important to remember that skin type is not always fixed for life. As well as the tendency to oiliness during adolescence and dryness as skin ages, skin can become more or less oily in response to hormonal fluctuations and external influences such as heat, cold, harsh cosmetics or rough treatment.

### Cleansers

#### What they're for:

Basic cleansing removes dirt, excess sebum and make-up, preventing it from clogging the pores and causing spots and blackheads.

#### Products available:

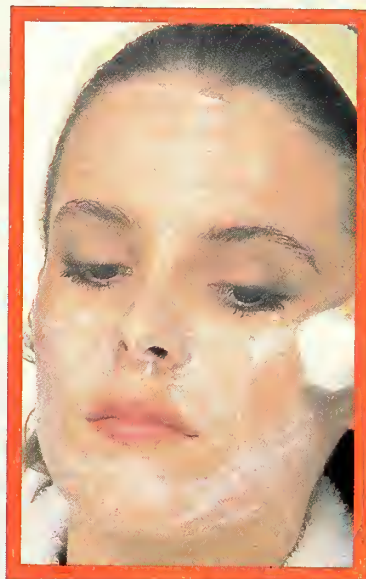
**Soap** is the traditional cleansing product, and one which many women still swear by. It's popular for its fresh feel and for economy, but can be too drying for some skins. Soap is not adequate for removing make-up and needs to be used in conjunction with a cleansing cream, lotion or milk when make-up is worn.

**Cleansing bars** look and act like soap, but are specially formulated for facial use, usually with a pH matching that of the skin, to avoid drying.

**Facial washes** are water soluble cleansers, in cream or gel form, that are applied like cleansing creams but washed off with water like soap. Most will remove make-up.

**Cleansing creams** and lotions are specifically designed to dissolve make-up, and are oil-based.

**Cleansing milks** have a higher water content and lighter feel than creams and lotions, but do the same job.



*Main picture: Apply masks in an even layer avoiding eyes and lips. Above: Remove cleanser with cotton wool using upward strokes. Repeat process until cotton wool comes away clean*









**Cleansing pads** are designed for temporary freshening-up and aren't thorough enough for daily use.

#### Getting the best from the products:

Soaps, cleansing bars and facial washes can be made more effective by working up a lather with a complexion brush (or a men's shaving brush). This helps loosen dead cells and stimulates the circulation. All three products should be rinsed off thoroughly with lukewarm water.

Cleansing creams and lotions should be applied fairly thickly all over the face and neck, left on for five minutes, then removed with cotton wool, using smooth upward strokes, while cleansing milks should be wiped over the face, again using upward strokes and cotton wool. In both cases the key to clean skin is to keep repeating the process until the cotton wool comes away clean.

### Toners

#### What they're for:

Toning finishes off the cleansing process by removing any residues and tightening the pores.

#### Products available:

**Astringents** are the strongest toners and usually contain alcohol. They are too harsh for all but very oily skins.

Toners, fresheners and tonics are all milder products, with or without alcohol. They are available for all skin types.

#### Getting the best from the products:

The choice of toner should always err on the side of mildness — many are too harsh for most skins. If a toner makes the skin feel dry and tight, it's too strong.

### Moisturisers

#### What they're for:

Moisturisers keep the skin feeling soft and supple by preventing moisture loss and adding moisture to the surface of the skin. They also make the skin look smooth and glowing, by creating a smooth surface that reflects light.

#### Products available:

**Moisturising lotions** are the lightest form of the product and ideal for use under make-up.

**Moisturising creams** have a higher fat



*Moisturiser should be dotted over the skin, then gently massaged in, using upward movements*



*Gently massage facial scrubs into moistened face with circular motions, until whole face is covered*

SKIN TYPE	DAILY CARE	EXTRA PRODUCTS	OTHER ADVICE
<b>Dry</b>	Cleansing cream, lotion or facial wash, followed by mild, alcohol-free toner, once or twice a day as required. Moisturising cream or lotion morning and night, and during the day if skin feels tight.	Gentle facial scrub once a week. Moisturising mask twice a week, with deep cleansing mask when skin looks dull.	Always apply moisturiser before going outside in cold weather, and choose moisturising make-up for extra help. Avoid sunbathing.
<b>Oily</b>	Any type of cleanser, used twice a day and followed by a mild astringent. Light moisturiser around eyes and on any dry areas, once or twice a day as needed.	Deep cleansing mask once a week, facial scrub once or twice a week. Treat blemishes with benzoyl peroxide cream.	Don't be tempted to use very harsh products. Although oily skin is tougher than other types, products which strip natural oils encourage it to over-compensate, creating even more oil.
<b>Normal</b>	Cleanser, toner and moisturiser for normal skin, twice a day.	Facial scrub and deep cleansing pack once a week — not necessarily on the same day.	Don't take normal skin for granted — almost any skin will become dry if treated harshly, or blemished if not properly cleansed.
<b>Combination</b>	Cleansing cream, lotion or milk, or facial wash, for dry skin, followed by gentle toner, twice a day. Moisturiser on dry areas only, morning and night.	Gentle facial scrub once a week. Deep cleansing mask on centre panel once a week, with moisturising mask on cheeks.	Choose products for dry skin. They won't affect oily sections, whereas products for oily skin will be too harsh for dry areas.
<b>Sensitive</b>	Hypo-allergenic cleanser, toner and moisturiser twice a day.	Gentle facial scrub once a week. Gentle cleansing mask when skin looks dull.	Treat skin gently, especially when using facial scrubs. Avoid very hot or cold water.

content and a thicker texture.

**Night creams** are especially rich formulations, designed as intensive treatments.

Despite their different textures, all these products do much the same job, and the choice between is really just personal preference.

#### Getting the best from the products:

Moisturiser should be dotted all over the face for dry or normal skin, and just on dry parts for oily skin, then gently massaged in, using upward movements and taking care not to pull or drag the skin — if this is difficult, a larger amount of moisturiser is needed. Moisturiser for daytime use should be applied about ten minutes before making-up, with especially dry areas topped up again just before applying foundation.

### Face packs

#### What they're for:

Face packs back up daily cleansing, toning and moisturising, with more intensive versions of all three, depending on the type of mask used.

#### Products available:

**Deep cleansing masks** include the traditional mud or clay-based types, which set hard on the face. Their water content evaporates on contact with the air, shrinking the mask. When it's removed, the surface blood vessels fill up, plumping up the skin, minimising pores and wrinkles and giving a healthy glow. Excess oil is absorbed by ingredients like clay, chalk or mud. The masks also lift off dead cells, rather as a piece of sticky tape lifts fluff off fabric.

**Peel-off masks** are gel formulations which form a skin on the face but don't set hard. When removed, they take grime and dead cells with them.

**Moisturising masks** temporarily smooth out wrinkles by plumping up the surface layer of cells, and also leave skin feeling soft and smooth.

**Stimulating masks** contain ingredients such as menthol, which act as a minor shock treatment, enlarging the surface blood vessels and bringing more oxygen to the skin. They tone the complexion, close pores and give a healthy glow.

#### Getting the best from the products:

Masks should be applied to thoroughly cleansed skin, in an even layer all over face and neck, but avoiding eyes and lips. The best time to use a mask is during a bath as the steam opens the pores and helps the cleansing process. After the recommended period of time, the mask should be removed with lukewarm water. Finish with toner to close the pores, and a fine layer of moisturiser.

### Facial scrubs

#### What they're for:

Facial scrubs loosen dead cells so that they can be rinsed away, preventing them from lying on the skin's surface and making it look dull.

#### Products available:

**Facial scrubs, polishing scrubs, exfoliating creams and washing grains** all describe the same product, which consists of tiny abrasive particles in a creamy base, that may also contain a foaming cleanser. They are available for all skin types.

#### Getting the best from the products:

The key to success with facial scrubs is to let the product do the work. Apply to a moistened face, then gently massage with circular motions, until the whole face is covered. Rinse off with lukewarm water, then moisturise.



# Benylin. The number one name for coughs.

**A powerful medicine calls for a powerful commercial.**



**WARNER  
LAMBERT  
HEALTH CARE**

This winter, the benefits of Benylin will be seen as well as heard. In fact, with a National Television spend of £1.7 million, our new commercial will be watched by 85% of housewives.

Specifically designed to demonstrate the efficacy of Benylin, the commercial also illustrates its warm, soothing taste and promotes the complete re-packaged range.

All of which should further increase consumer confidence in the cough medicine that's recommended by more pharmacists than any other.

## Benylin

The number one name for coughs.

Benylin is a Trademark.



# Syndol® breaks the Tension Headache Cycle

Anxiety and stresses of today's lifestyle can begin the Tension Headache cycle.

Vice-like pressure around the head.

Eyes can feel sore and tired.

The pain may last all day.

Tension and pain in the neck and shoulder muscles.

Clenching jaw muscles.



**Syndol is specifically formulated to break the cycle of Tension Headache by relieving the pain and thereby easing muscular tension.**

From **Merrell**  
**Medicines**  
Confidence in pharmacy 

Trademarks: Merrell, Dow, Syndol



Had a battle at Waterloo  
as I fought my way  
through the crowd.  
The power went off on  
the telex machine and the  
boss went off at me.  
Our copier chewed up  
the paper so I didn't  
have time for a bite.  
By 8 everyone had gone  
except me and my  
Tension Headache.



If the pressures of everyday living  
wind up as a Tension Headache,  
ask your pharmacist for Syndol.

SPECIALLY FORMULATED  
**Syndol**<sup>®</sup>

FOR FAST RELIEF FROM THE PAIN  
OF TENSION HEADACHE.

I knew it was going  
to be one of those days.  
The cornflake packet  
was empty  
and the train was full.  
Went down the up  
escalator then rubbed  
the boss up the wrong way.  
Got frosty glances up  
the corridor and scalding  
coffee down my trousers  
and all I had for lunch  
was a Tension Headache.



If the pressures of everyday living  
wind up as a Tension Headache,  
ask your pharmacist for Syndol.

SPECIALLY FORMULATED  
**Syndol**<sup>®</sup>

FOR FAST RELIEF FROM THE PAIN  
OF TENSION HEADACHE.

The alarm didn't  
go off but the  
milk already had.  
I just missed the  
bus and really  
caught the rain.  
Spent the journey  
standing up while  
someone else  
stood on my feet.  
My Tension Headache  
got to work at the  
same time as I did.



If the pressures of everyday living  
wind up as a Tension Headache,  
ask your pharmacist for Syndol.

SPECIALLY FORMULATED  
**Syndol**<sup>®</sup>

FOR FAST RELIEF FROM THE PAIN  
OF TENSION HEADACHE.

## National Advertising Campaign on now!

Continuing black and white press campaign is increasing consumer  
awareness of Syndol.

**Stock up now to meet demand.**



**Bold new look means faster  
turnover and growth in  
profits - available in  
packs of 10, 20 and 50.**



**CREAM E45**

dermatological cream *FOR DRY SKIN CONDITIONS*

USE BY

Now you can treat

**Hc45**

hydrocortisone cream

REDUCES INFLAMMATION  
AND CALMS IRRITATED SKIN

1%

USE BY

even more skin problems.

Even the best of emollient creams can't cope with skin complaints like contact dermatitis, allergic rashes, insect bites or stings.

That's why Hc45 has proved such a success.

With its non-greasy formulation, containing 1% hydrocortisone, there is no better or more effective cream of its type on the market.

Or more popular. Because Hc45 already outsells any similar product. Just like Cream E45, of course.

**CROOKES**  
*Healthcare*  
Behind the best names



What are you selling now that you weren't selling this time last year? Have you caught up with the big trends and the latest launches? *Over the Counter* presents a selection of the products of 1988.

## Babycare

### Disposable baby bottles

Just in time for the picnic season Jackel launched Pur disposable bottles. Throwaways consist of a self-contained sterile teat, cap and 255ml bottle bag unit which can be fixed onto the bottle holder without the teat being touched. Promotion is through the specialist baby Press.

Jackel International. Tel: 091-250 1864  
Starter pack bottle and 3 teats 99p  
teats in 10s £2.49 (June 25)

## Remember

Prices in this section are correct at time of going to Press. For latest packs and prices see C&D Price Service.



### Unichem Ultra Nappies

The then latest superabsorbent nappy with leg elastic trim, extra soft lining and wetness indicator. Usual POR of 23 per cent. Unichem Ltd. Tel: 01 391 2323  
Size Infant £2.32; toddler £2.62; child £2.94 (February 20).

### Dentinox cradle cap shampoo

Infant shampoo range addition with sodium lauryl ether sulphosuccinate 6 per cent and sodium lauryl ether sulphate 2.7 per cent. Dendron Ltd. Tel: 0923 229251  
Size 125ml £1.35 GSL (January 16)

### Keep 'em safe with Cannon

Cannon Babysafe's safety range comprises ten products to help prevent those little accidents that occur round the home. Soft spouts for baths, a potty lock, drawer latches, corner cushions, fridge locks and warning plaques for the car, among others. Blister packed onto cards which illustrate the product in Cannon's new graphic style. Cannon Babysafe. Tel: 0787 280191  
Prices £2 to £5 (October 15)

### Numark toiletries

A 17-item toiletry range from Numark emphasised interest in baby toiletries from all three of the major symbol groups. Numark's range includes wipes, talc, lotion, shampoo, nappy liners and sterilising equipment. ICML Tel: 0985 215555 (April 30)

### Designer bottles

Designer feeding bottles appeared in the UK in March, with the launch of Tommee Tippee's co-ordinated range. Illustrations featured ducks or jungle animals on clear polycarbonate bottles and matching terry bibs. Jackel International. Tel: 091-250 1864  
Bottles £1.59 bibs £1.15 (March 12)

### Togs nappies

By anyone's book, the Togs nappies launch was a big one. Swaddlers outlined £12m worth of advertising and promotions to support what they claimed was the first nappy to be both superabsorbent and have an elasticated waistband. The aim is to compete with Pampers and Peaoudou, and to pull back the drift to own label which had seen brands slip to 35 per cent of the market. Swaddlers. Tel: 091-482 5566.  
Sizes Newborn 20s £1.95 and 68s £6.95, infant 48s £6.95 and 88s £12.35, toddler 10s £1.65 42s £6.95 and 76s £12.35, and childsize 40s £6.95 (May 7)



## Beauty/Haircare

### US haircare hits UK

US company Helene Curtis, who boast several leading brands at home, arrived in the UK with Finesse shampoo and conditioner, claimed to clean or condition the hair as much as it needs. The second part of the launch promotional campaign starts again this month on television and in the women's Press.

The brand is seen by its American parent as paving the way for further launches. Chemist Brokers. Tel: 0705 219900.  
Sizes Both 200ml £1.09 (May 7)

### L'Oreal Permifique

A foam perm formulation with conditioner and protector. Both perm solution and neutraliser are in non-drip foam and come in two variants for natural and colour treated hair. Laboratoires Garnier. Tel: 01-937 5454  
Price £4.09 (January 30)

### Henna Plus

A haircare range based on natural products in two variants — for blondes and brunettes — none of which have been tested on animals. The range comprises conditioner (300ml £1.79), hair miracle (150ml £4.99), henna powder in four colours (50g £1.79), shampoo (300ml £1.79) spray (125ml £1.99), spray gel (125ml £1.79) and treatment wax (200ml £1.99). Thomas Christy. Tel: 0252 29911 (March 19)

### Colors de Benetton

Designer fragrance from Benetton for the 15 year old as fashion house takes first step in building cosmetic and fragrance portfolio. Distribution of this semi-oriental scent was selective and backed by Press advertising only this year with TV support scheduled for 1989. A men's line is planned for this year with a make-up range scheduled for 1990. The range comprises eau de parfum (15ml £32), eau de toilette spray (50ml £16, 100ml £24) and eau douce splash cologne (50ml £11.75, 100ml £19.50). Maurice Douek. Tel: 01-328 1036 (January 23)

### Collection 2000

Collection 2000 unveiled their budget-priced colour cosmetics range at Chemex in September. The Lancashire-made products come in 38 standard trays which add together to make a display, covering make-up, blushers and eye colours, 45 nail polishes and 30 lipsticks. None of the products have been tested on animals. Collection 2000. Tel: 0732 453213  
Prices start at 69p (July 30)



## For men

### Shulton's Rapport

Pitched between fine fragrances and the mass market in a bid to get the man who uses a fine fragrance on special occasions only to trade up, Rapport is described as refreshing citrus with artemisia and sage, followed by exotic woods and spices over a ground note of warm spice and musk. The range comprises after shave, after shave moisturiser, eau de toilette spray, deodorant and moisturising shaving foam.

Shulton. Tel: 091-237 1231

Prices between **£4.50** for 150ml shaving foam to **£12.50** for 100ml aftershave (May 14)

### Raffles

The fictional character from the '30s, A.J. Raffles, provided the inspiration for a male fragrance range — eau de toilette and aftershave — of the same name. A Press advertising campaign and a series of free gifts with purchase offers supported the launch.

Raffles International. Tel: 2364 65955. Distributor Fine Fragrances & Cosmetics Ltd. Tel: 01-979 8156.

Packs 75ml and 125ml

Prices from **£12.75** to **£24** (April 23)

### Just for men

Permanent hair colourant in three shades for men who want "a gradual change". Designed to cover grey in light, medium and dark brown.

Combe UK. Tel: 01-680 2711

Price **£3.99** (March 12)

### Insignia hairstyle

Insignia all over body programme extended with haircare range for 16-24 year olds comprising conditioner, hairspray, styling mousse, gel and shampoo.

Shulton. Tel: 091-237 1231  
Price **£1.39** (March 19)

### Gillette shaving gel

Regular and sensitive variant gel with special lubricants to reduce razor drag. No product contact with propellant gas.

Gillette UK. Tel: 01-560 1234  
Size 200ml **£1.39** (February 6)

## Healthfoods/vitamins

### Minadox Boost IQ

Launch of vitamin supplement for children followed a BBC QED programme which suggested a link between vitamin intake in the young and intelligence.

Minadox Boost IQ (increased quotient) capsules contain 12 vitamins and 10 minerals, are naturally coloured and free from added flavour and preservatives. Seven Seas Health Care. Tel: 0482 75234  
Size 30s **£1.99** (February 27)



### Vitalert

A ten product range of multivitamins and minerals free from artificial colours, flavours, preservatives, sugar, starch and carbohydrates. Each variant comes in a 30 tablet, one month supply, blister pack: children; teenagers; men; seniors; exercise; dieters; stress; smokers; hair; nails, and skin. Chemist Brokers. Tel: 0705 219900

Size 30s **£2.69** (January 23)

## Oral Hygiene

### Oral B plus

Professional adult toothbrush aimed at the premium price market. In four sizes and a range of colours they feature round ended filaments and rounded head with long, narrow neck for better access to back teeth and gums.

Oral B Laboratories. Tel: 0296 432601

Size Small, regular medium and large at **£1.19** (January 2)

### Wisdom toothpaste

Long time leaders of the mass market toothbrush sector, Addis added toothpaste to their Wisdom range in July. For kids, Mr Men and Care Bears adorn packs to help sales of dental gel (50ml **79p**).

While Wisdom toothpaste (50ml **55p**) hopes to build on the toothbrush heritage.

Addis. Tel: 0992 584221. (July 9)

### Search 2 for kids

Children under five now have their own toothbrush from Sensodyne. Search 2 features a very small head and extra soft, end rounded filaments, with a long slim neck allowing access to the back of the mouth and a broad handle for easy gripping.

Stafford-Miller. Tel: 07072 61151  
Price around **99p** (October 8)

### Disney for Oral B

Oral B's Duck Tales, featuring Donald Duck's naughty nephews Huey, Dewey and Louie, aim to make brushing fun for toddlers. The professional toothbrush



features a compact and slightly rounded head with extra soft end rounded filaments and a larger handle.

Oral B Laboratories. Tel: 0296 432601

Price **99p** (October 15)

### En-de-kay gum

En-de-kay gum contains urea, which is converted by mouth bacteria to ammonia which then neutralises plaque acids — the cause of tooth decay. The action

of chewing gum after a meal is also said to speed the removal of plaque acid, so reducing the time tooth enamel can be attacked.

Stafford-Miller. Tel: 07072 61151  
Size 25 pieces **75p** (April 30)

## OTC Medicines

### Disprol

Reckitt & Colman break the Disprin mould and switch to a paracetamol base. The 500mg tablet is indicated for the relief of pain in migraine, headache, backache, periods, rheumatism, dental aches and for the symptoms of colds and flu. Dose is two tablets up to four times daily. Backed by £2m of national television the company claimed Disprol had "the most significant launch support of any analgesic in the past five years".

Reckitt & Colman. Tel: 0482 26151

Size 8s **39p** GSL 24s **99p** GSL (January 15)

### Anadin Paracetamol

The trend from aspirin to paracetamol prompted the "nothing acts faster" people to launch Anadin Paracetamol. Television has been used for promotion, with another burst this Winter.

Whitehall Laboratories. Tel: 01-636 8080

Packs 6s **34p** GSL 12s **60p** GSL 24s **£1.04** GSL and 48s **£1.62** (May 21)

### Aspro Clear Extra

The 500mg aspirin strength of Nicholas's popular pain reliever is indicated for relief of severe headaches, migraine, period pain and muscular and rheumatic pain. Nicholas Laboratories. Tel: 0753 23971

Sizes 20 tablets **£1.20** (May 14)







### Hismanal from POM to P

Janssen's hay fever preparation Hismanal, containing 10mg astemizole in each tablet, became available OTC in May. Dosage is one tablet daily, for adults and children over 12. Janssen. Tel: 0235 772966. Packs 10 **£2.99** (P) (May 28)

### Migrafen goes national

Chatfield Laboratories Migrafen brand of ibuprofen 200mg is going national following a successful Yorkshire test market. For relief of migraine headaches, rheumatic and muscular pain, backache and colds and 'flu symptoms. Chatfield Laboratories Tel: 01-370 4664. Packs 24 tablets **£1.45** (December 10)



### Diocare double

Beecham have combined the benefits of an antidiarrhoeal with rehydration therapy to produce Diocare. It contains morphine hydrochloride (0.395mg per sachet) with glucose and sodium and potassium salts to replace those lost. For adults and children over 12 two sachets, for children six to 12 one sachet, every two to four hours. Beecham Health Care. Tel: 01-560 5151. Packs 10 sachets **£1.89** (P) (October 8)

### Remember

Ⓟ denotes that a product is **Pharmacy only** and can be supplied only under the supervision of a pharmacist.

### Personal hygiene



### Limara roll-ons

Limara premium-priced but complementary roll-on deodorants joined the aerosol range in June, boosted by the general trend to find alternatives to CFC aerosols. Smith & Nephew. Tel: 021-327 4750. Packs 50ml **99p**

### Dettol hand soap

A soap to complement the rest of the Dettol range — containing 0.1 per cent triclosan and 0.5 per cent chloroxylenol — was launched in June. Support included one million plus samples and a Summer TV and radio campaign. Reckitt & Colman. Tel: 0482 223141. Size 100g **52p** (June 25)

### Natrel Plus

A "natural" deodorant range in three fragrances for both men and women. Unisex Fougere, Ylang for women and Xores for men all come in aerosol form while the roll on features in Ylang and Fougere and the solid in Fougere alone. Natrel Plus packs promote a natural plant extract said to "work in harmony with your body". The launch featured a £3.2m television campaign backed by £300,000 of Press advertising. Extra value packs and a full range of POS completed the launch package. Gillette UK. Tel: 01-560 1234. Sizes Aerosol 150ml **£1.19**; roll on 40ml **75p** and stick 50g **£1.29** (January 16)

### Skincare

#### Simply Pure

First of the "natural" skincare launches for 1988, Christy introduced the Simply Pure four product range. Toning lotion (200ml **£1.95**) Cleansing lotion (200ml **£1.95**), moisturising lotion (200ml **£1.95**), and moisturising cream (100ml **£2.49**), comprise the white packaged range. Thomas Christy. Tel: 0252 29911 (January 9)

#### Cuticura's skin care

Fragrance-free mildly medicated cleanser, a toner, and a moisturiser (all 150ml **£2.49**), together with a hypo-allergenic



cleansing liquid (236ml **£3.99**) and medicated shampoo (236ml **£2.39**) joined the now revamped Cuticura range. Advertising has concentrated on the women's Press since the July launch. Dep. Tel: 0753 820743 (July 2)

#### Wash with E45

A moisturised washing cream for dry, sensitive and irritated skin. Contains 82 per cent mineral oils and 5 per cent zinc oxide in a soapless base. Launch support included a £250,000 women's Press campaign. Crookes. Tel: 0602 507431. Size 150ml **£2.49** (August 6)





## Remember

Prices in this section are correct at time of going to Press. For latest packs and prices see C&D Price Service.

Ⓟ denotes that a product is **Pharmacy only** and can be supplied only under the supervision of a pharmacist.



## Skin care for the over '40s

Women over 40 are the target for Johnson & Johnson's Empathy range, which appears six years after the launch of the speciality shampoo of the same name. The range comprises cleansing lotion (150ml **£2.79**), moisturising cream (50ml **£3.29**) moisturising lotion (125ml **£3.29**) and hand and body lotion (200ml **£2.19**)

Johnson & Johnson. Tel: 0628 822222 (September 17)

## Sundries



## Timotei expands

It started as a shampoo, then came a conditioner, but by summer Timotei had entered the skincare market too. The four product range facial wash (125ml **£1.35**), deep cleansing lotion (150ml **£1.69**), herbal freshener (150ml **£1.69**) and moisturiser (75ml **£1.79**) has been supported by TV advertising and covermounts in the women's Press.

Elida Gibbs. Tel: 01-486 1200 (June 18)



## L'Oréal unveil Plénitude

The boom in the skincare market was reflected with the launch in July of Plénitude, a nine product range from L'Oréal, claimed to be the number one brand in France. The specific cleansing and moisturising products come in a permanent shelf unit with a tester facility to encourage trial.

L'Oréal. Tel: 01-937 5454

Prices from **£3.29** to **£6.99** (July 16)

## pH Perfect

Robins were yet another company to tilt at the skin care market in 1988 with the Autumn introduction of pH Perfect, a pH-balanced system of cleansers and moisturisers. A year long women's Press campaign for the four product range — facial wash (150ml, **£2.75**), wash bar (100g **£2.35**), body wash/shampoo (150ml **£3.75**) — began last month. A.H. Robins. Tel: 0293 560161 (September 10)

## Peach of an idea

Thomas Christy aim to co-ordinate a face and body care regime with Peach, launched at the end of May. The range consists of a facial scrub, a moisturising mask, facial wash cream and a body scrub, the latter including synthetic beads to act as an exfoliator removing dead skin. Thomas Christy. Tel: 0252 29911 Packs Facial scrub 60g tube **£1.95**, body scrub 125ml **£2.95**, mask 50ml **£1.95** and wash cream 125ml **£1.95** (May 28)



## Duomed graduated compression hose

Medi were the first hosiery company to announce a range of stockings to comply with the revised Drug Tariff specification. In below knee and thigh length the stockings come in three classes: light; medium, and strong compression, corresponding to the new Classes I, II and III.

Medi UK. Tel: 0432 51682

Sizes As above. Prices as Drug Tariff (February 13)

## Scholl's stockings

Scholl launched their new range of compression stockings for FP10 prescription in March. The stockings, graded, according to the new Drug Tariff specification, Class 1 (New Nylastik), Class II (New Sheer Softgrip) and Class III (New Duofine).

Scholl. Tel: 01-253 2030

Sizes Thigh and below knee. Prices as Drug Tariff (March 26)

## Enervit Protein

A once-a-day meal replacement diet supplying 136 calories when a sachet is blended with water. It comes in chocolate, vanilla and apple flavours and contains fructose, lactose-free milk proteins and guar flour. When two other normal meals are eaten a day there is a claimed weight loss of 2-3lbs a week.

Distributed by DAP. Tel: 051 486 7117

Size 7 sachets **£8.95** (January 30)



**"Pharmacy Only"**

**Well-proven, well-presented, well-accepted products –  
with the personal service and support of Panpharma.**

## Propain

**Propain**, in the trim blue and white pack with matching display materials, is one of the most widely used adult analgesics in the 'powerful' group.

Propain (Paracetamol, Codeine Phosphate, Diphenhydramine Hydrochloride and Caffeine) has a wide range of indications, including migraine, headache, toothache, muscular pains and period pains plus the symptomatic relief of influenza, feverishness and colds.

Propain – Powerful Pain Relief.  
12 tabs. retail at £1.27, 100 tabs. at £8.75.



**For treatment of Migraine, Headache, Toothache, Muscular Pains and Period Pains. Also for symptomatic relief of Influenza, Feverishness and Colds.**

P

## Medised

**Medised Suspension** (Paracetamol plus Promethazine) with a pleasant blackcurrant flavour. Soothing pain relief for babies and children, from 3 months to 12 years old.

Medised packaging is bright and colourful, guaranteed to enhance any shelf or window display. Consumer advice leaflets and a varied selection of Medised display items complete the range of attractive merchandising materials which are currently available.

Medised, complete with child resistant cap, in bottles of 140ml., retails at £1.79.



## Dermacort®

**Dermacort**, the gentle, soothing treatment for itches, rashes and skin irritations. Although containing only 0.1% Hydrocortisone, clinical evaluations have shown Dermacort to be at least equivalent to the 1.0% Hydrocortisone preparations currently sold over the counter.

Dermacort technical leaflets, specially written for Pharmacy Staff, are available together with a selection of eye-catching point-of-sale materials to complement your in-store display.

Dermacort Hydrocortisone Cream 15g. retails at £1.85.

**Fast effective treatment  
for skin irritations,  
dermatitis and rashes**

Due to reactions to plants and insect bites, jewellery, toiletries and deodorants, soaps and detergents



**Dermacort**  
Hydrocortisone Cream  
Quickly absorbed for fast relief.

15 g

All product or merchandising enquiries relating to Panpharma pharmacy products should be made via your local representative or Panpharma Sales Department on 01-561 8774.

panpharma



## Toiletries

### Incontinence 'upfront'

Genesis Hygiene hope to bring the problem of incontinence out of the closet with the launch of a new range of fitted pads, shaped pads and stretch pants. Superabsorbent material is used in the Super-Dri pads, which can absorb up to 40 times their own weight in fluid. The pads come in two sizes; medium (blue packs 12 £6.50) and large (yellow packs 10 £6.50). Also new are Shapes pads in three sizes — 1 coded white (20 £3.95), 2 coded blue (20 £5.50) and 3 coded yellow (20 £6.50). The stretch pants come in yellow, blue and brown in packs of 4 (£1.99). Genesis Hygiene. Tel: 051-708 6909 (November 26)

### First Response in pregnancy

Having launched an ovulation predictor to help couples trying to conceive, it was only a matter of time before Tambrands brought out a test which would show whether the first kit had done the trick. The First Response pregnancy test was described as the second in what the company intends to be a range of diagnostic test kits. It gives a positive result — a pink colour — in five minutes. Tambrands. Tel: 0705 474141 Pack Two tests £6.95 (June 18)

### Clearblue One Step

In July, Unipath launched what they claimed was the simplest, fastest and most reliable pregnancy test available. The pen sized stick tests give a result in three minutes with 99 per cent accuracy. The sampler stick is held in the stream of early morning urine and gives a blue line in the window if positive. Unipath. Tel: 0234 47161 Pack Two tests £8.35 (July 2)

### 'Yes' or 'no'... Today

Pregnancy test Discover Today can be used on the first day of a missed period, on a urine sample collected at any time and gives a positive result in one minute, say Carter Wallace. A pink/purple

colour in the reaction zone is the positive result; a negative result — no change — can be confirmed after three minutes. National women's Press advertising starts this month.

Carter Wallace. Tel: 0303 850661 Pack Two tests £8.50 (November 19)

### Four wipes

Sterets Health Wipes were launched in April as a "unique concept in personal hygiene". A four product range designed for specific tasks — Steri-wipes for cleaning minor cuts and abrasions, Fresh-wipes for a general clean-up, Seat-wipes for cleaning toilet seats and bowls, and Hand-wipes for cleaning hands after visiting the toilet. Colour coded cartons match the display unit.

Seton Healthcare Group. Tel: 061-652 2222

Pack Cartons of 10 wipes, each individually packed. Prices Steri-wipes 99p the rest 59p (April 16)

### RFSU condoms

1988 was the year the word "condom" was finally accepted without a snigger. In May, the leading Swedish condom range made its UK-debut through distributors Thomas Christy. RFSU's range comprised superstrong Okeido, green and ribbed Birds 'n Bees and shaped Black Jack.

Thomas Christy. Tel: 0252 29911 Pack 10s Okeido £3.25 others £2.79 (May 14)

### Safe Play

The Durex Safe Play condom is said to put the emphasis on "healthy reliable fun for today's style conscious youth". It comes in red and black packs in natural and ribbed varieties, both lubricated and containing the spermicide nonoxonyl-9.

LRC. Tel: 01-527 2377 Pack Natural 3s 60p 12s £2.29 Ribbed 3s 70p and 12s £2.69 (November 9)

### Jeyes Moists

The first in a line of products set to cause British families to undertake a "radical change to the personal hygiene regime" was Jeyes



Moists-wet toilet tissues. One in four Europeans are said to use similar products after dry toilet paper, and the product profile is said to fit well with the chemist image. Seventy wipes are foil sealed in a plastic container which acts as a dispenser.

Jeyes. Tel: 0842 4567

Packs £2, refills £1.85 (August 6)

### Anti-Jet-Lag lift-off

A product claimed to be the first successful remedy for jet lag landed in the UK from the USA in

November. Anti-Jet-Lag formula claims to emulate the body's own chemical triggers to avoid the use of drugs or stimulants. Tablets containing the amino acid tryptophan are taken an hour before sleep at the destination, and tablets containing another amino acid, tyrosine, are taken before breakfast and lunch the next morning.

Distributor General Healthcare. Tel: 01-848 7766

Packs 2-days supply £4.95 12-days £19.95 (November 5)

## New in the dispensary

■ Long a favourite of some skin specialists, but not hospital pharmacy manufacturing units because they had to make it from capsules, clindamycin lotion was launched in January ready-made by Upjohn as Dalacin T in a Dab-O-Matic bottle. (January 23)

■ The technical problems patients have with ordinary inhalers and Rotacaps led to the development by Allen & Hanbury's of Ventodisks and Becodisks which avoid the need for breath synchronisation with the aerosols or fiddly handling with the capsule inhalers. (January 30)

■ Astra too launched an improved inhaler design with the Bricanyl Turbohaler at the end of March. The Turbohaler which is breath activated, also includes a visual warning that doses are running low. (March 19)

■ Organon's Mercilon "Pill" combines an established dose of the latest progestogen desogestrel with an "ultra low" — 20 micrograms — dose of ethinylloestradiol. (April 16)

■ What news men have been waiting to hear for years finally arrived as Upjohn launched Regaine for male pattern baldness. Containing minoxidil in solution, Upjohn say the product is private prescription only. (April 23)

■ Erythromycin in a topical formulation for acne was released by Stiefel in the Summer. Suiemycin contains 2 per cent erythromycin in a non-staining

alcoholic base. (July 2)

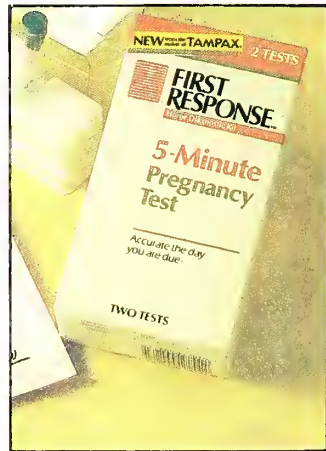
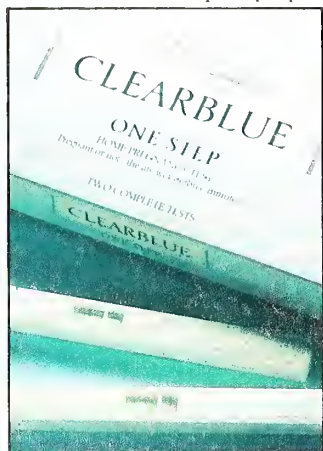
■ Seborrhoeic dermatitis and yeast dandruff are among the uses for Janssen's Nizoral shampoo, containing 20mg ketoconazole per ml. (July 9)

■ Travel sickness will never be the same again with Ciba's new Scopoderm TTS, a self-adhesive patch that sticks behind an ear. The patch contains hyoscine, which is absorbed for up to 72 hours through the skin. One warning: hands should be washed after touching the system, as hyoscine can dilate the pupil of the eyes. (September 10)

■ Children can now get vaccinated against measles, mumps and rubella (German measles) all with one jab. Several companies will be in the market before too long, first out was Smith Kline and French with Pluserix, (September 10). Wellcome followed with MMR-II. (November 5)

■ Evening primrose oil moved off the food supplement shelves and into the dispensary with Scotia Pharmaceuticals' Epogam for the symptomatic relief of atopic eczema. Prescriptions however, if written generically must say "gamolenic acid in evening primrose oil". (October 22)

■ Lederle's Traxam is the first non-steroidal anti-inflammatory drug (NSAID for short) to appear in a topical formulation. The active ingredient is felbinac, which is converted for its action to fenbufen. (November 5)





## NPA courses for assistants

### Success in selling.

Covers importance of good customer service, preparing to sell, achieving a sale, improving customer satisfaction. Designed mainly for sales assistants new to retailing or pharmacy or who have had no formal training in selling skills; also useful for more experienced assistants to consolidate knowledge.

**Time:** 9.45am-4.30pm.

**Cost:** £28.75 (includes £3.75 reclaimable VAT). Includes coffee, buffet lunch and tea.

### Basic principles of merchandising.

Covers how effective merchandising increases sales, the pharmacy image, what tempts customers to buy, layout and customer flow, presenting the products, sales promotion. Designed for sales assistants responsible for handling and replenishing fixture stock. (Not a window display course.)

**Time:** 9.45am-4.30pm.

**Cost:** £28.75 (includes £3.75 reclaimable VAT). Includes coffee, buffet lunch and tea.

### Surgical Hosiery.

Covers the cause of varicose veins, treatments, prescribable hosiery as well as demonstration and practice of measurement and fitting. Suitable for staff who have responsibility for advising on surgical hosiery, pre-registration pharmacists and as a useful refresher for pharmacists.

**Time:** 10am-4.30pm.

**Cost:** £51.75 (includes £6.75 reclaimable VAT). Includes coffee, lunch and tea.

### Baby Care.

Covers the mother-to-be and her pregnancy, principles of skin care for mother and baby, common baby ailments, nutrition and child development. An essential course for assistants involved in the baby care section.

**Time:** 9.30am-4.30pm.

**Cost:** £28.75 (includes £3.75 reclaimable VAT). Includes coffee, lunch and tea.

### Photography (half day course).

Covers types and sizes of film, cameras, developing and printing and faults in pictures.

**Time:** 9.30am-12.30pm or 2pm-5pm.

**Cost:** £25.30 (includes £3.30 reclaimable VAT).

*Details and booking forms for all courses are available from the training department of the National Pharmaceutical Association, Mallinson House, 40 St Peter's Street, St Albans, Herts. Tel: 0727 32161.*

# Diary

The following National Pharmaceutical Association courses are for pharmacy assistants

## January

17	Brighton, Bedford Hotel, Kings Road	Success in Selling
31	Manchester, Britannia Hotel, Portland St	Success in Selling

## February

1	Manchester, Britannia Hotel, Portland St	Basic Principles of Merchandising
23	Plymouth, Copthorne, Hotel, Armada Way	Success in Selling

## March

7	Birmingham, Albany Hotel, Queensway	Success in Selling
8	Birmingham, Albany Hotel, Queensway	Basic Principles in Merchandising
14	London, Great Northern Hotel, King's Cross	Surgical Hosiery

## April

5	London, Great Northern Hotel, King's Cross	Photography
13	London, venue to be confirmed	Baby Care (Provisional Date)

*Courses for pharmacists will be published in Chemist & Druggist's Coming Events column*

## Hair of the dog?

Elderly "countylady", complete with poodle: "This hair brush I bought last week is no use to me". She pushes across the counter a rather badly crushed box with the hairbrush placed roughly inside.

Assistant, gingerly removing brush from box: "Oh I'm sorry, madam, what was wrong with it?"

Customer: "I don't know. I just didn't suit me."

Assistant, eyeing the mass of unpleasant hair caught by the bristles: "I'm sorry, madam, but we can't accept this back. It's been used — perhaps you might use it on the dog?"

Customer: "That's no use. He doesn't like it either!"

## Advertisement



## A completely new concept. Genesis is for Everyone

GENESIS is totally different, a major breakthrough in multi-mineral and vitamin formulation. Many existing products contain too many ingredients in quantities so small as to be virtually ineffective. Genesis is a careful balance of just 16 of the most

essential nutrients, in really significant amounts. Launched on TV in Spring 1988, Genesis is a certain winner, in 30, 90 and 365 day packs. Announce this asset to your customers. They will thank you for it.



# Now the safest way to sterilise is also the simplest.



**1** Place rinsed bottles and teats (any size, any make) in carrier and load into Steriliser.



**2** Pour 30ml of water into Steriliser's evaporating dish using measure provided.



**3** Replace Steriliser lid, plug in and press operation button to start.



**4** Six minutes later Steriliser switches itself off leaving sterile bottles and teats ready for use.



Sterilising babies' bottles and teats has always been a rather hit and miss affair.

There's boiling. Fine if it's done for long enough and if there are no air bubbles trapped in the bottles.

There's the cold method. It works if the concentration is right, but recent worries about the effect of sterilisation chemical residues means that rinsing is now widely recommended. This could result in a non-sterile bottle.

## SAFETY FOR MOTHER AND BABY.

Now there's the Avent Steriliser, a steriliser which uses a totally different technique – steam sterilisation.

Steam sterilisation is the most efficient way of destroying the harmful bacteria which can cause Gastro-Enteritis and, amongst other things, Thrush.

For years it has been the method chosen by hospitals and now Avent have developed it for the home.

Tried, tested and fully approved by professionals in baby care, the Avent Steriliser is safe, easy to use (as you can see) and very fast. Up to four bottles and teats can be sterilised in just six minutes.

## INCREASED PROFITS FOR YOU.

The Avent Steriliser, retailing at £30.39 (excl VAT), has already created a great deal of interest amongst mothers and is rapidly becoming a major selling item.

With a trade margin in excess of £6.00 on each sale, that can only mean increased profits for you.

We're putting a lot of resources behind it with full colour informative advertising in baby care magazines and annuals, plus merchandising support and product demonstrations.

Don't be left out with the old methods on your shelves. Stock up with the safest and simplest steriliser on the market. From Avent.



**AVENT**  
PURELY FOR BABIES  
MADE IN ENGLAND

CANNON BABYSAFE LTD. LOWER ROAD, GLEMSFORD, SUFFOLK CO10 7QS. TEL: (0787) 280191. FAX: 0787 282088.



# Questions & Answers

The National Pharmaceutical Association's syndicated "Ask your local pharmacist", formerly "Ask your chemist" column appears in dozens of local newspapers and freesheets on a regular basis. Each issue of *Over the Counter* will feature the coming month's questions and answers.

*On the radio the other day someone was saying we should go to the pharmacy and ask to speak to the pharmacist before buying medicines for minor ailments. What do they mean by minor ailments?*

Minor ailments are the type of illness which you would usually treat yourself, for example colds, sickness due to eating something, diarrhoea, constipation, travel sickness and indigestion. You will find that most pharmacists will tell you when they sell you a medicine for a minor ailment, that should the medicine not help within a few days then you should go to your surgery. Minor ailments usually get better without treatment after a few days, but medicines can relieve most of the symptoms.

*A friend has high blood pressure and she has been put on a low salt diet. How would this help her blood pressure?*

Both cooking salt and table salt contain sodium which helps cause an accumulation of water both in the blood and in the tissues of the body, so producing a higher blood pressure. If there is less fluid in the body, blood pressure will be lower.

*Why is it that the deodorant I have been using for many years doesn't seem to work anymore?*

This is a rather common complaint. What appears to happen is that our bodies become insensitive to certain products after they have been used for a while. Try changing to another deodorant for a few months and then switching back again to your favourite. You may find that it will be effective again.

*The doctor has sent me to the hospital for an x-ray. He says I probably have a prolapsed disc. What does he mean?*

There is a pad of gristle or cartilage between the vertebrae, or bones of the spine. These discs absorb the shock set up, for example, when you jump or land heavily on your feet. They protect the spinal cord and the brain from being jarred. One of these discs may rupture and by pressing on a nerve root, cause back pain. This condition is also called a "slipped disc".

*My son has a very ugly wart on his hand and would like it removed. What will the doctor do?*

There are various treatments for warts available. One is to treat the growth with a chemical so that when the cap dissolves, the rest dries up, and the deep-rooted tissues can be removed. Other methods are: to cut it out, burn it out by cauterisation or freeze it out by cryosurgery after the surrounding area has been made numb by an anaesthetic. Remember he will be given a pain killer — the anaesthetic — so the removal won't hurt.

*The doctor wasn't sure whether my twelve-year-old daughter had German measles last year. This year the school has asked my permission to have her vaccinated. Is it necessary?*

Yes, it would be best to have your daughter vaccinated. If she did not have German measles, then she could catch the disease later on. If she were pregnant at the time, the baby could be harmed. That is why vaccination against German measles is so important for girls who have not had the disease.

*They were talking about acupuncture on the radio. How does it work?*

Acupuncturists believe that there exist in the body dual flows of energy called Yin and Yang. These circulate through the body along "meridians" or channels similar to the blood circulation. When these two energy forces become unbalanced, ill health follows. So acupuncture is used to remove surplus energy via the skin surface at certain points on the meridians and shift energy to other areas where there is a deficiency. There are many different scientific theories to explain how acupuncture works, such as electrical resistances in the skin, but there is none which is universally accepted.

## ADVERTISEMENT

# The spice of life!

Now in Great Britain — Kwai, the highly concentrated, odourless garlic tablet which over 1,000,000 Germans use to supplement their daily diet.



## Body matters

With the pressures of modern life, more and more people are becoming aware of the need to lead a healthier lifestyle to enjoy today's increased life expectancy to the full.

As we get older, start to feel our age and yet seem to have ever-increasing demands put on us, regular body maintenance is necessary to help us cope.

We are being urged to avoid stress, to take care over cholesterol and to keep to a well balanced diet.

Modern research is fortunately finding new evidence of the way in which certain natural food products like garlic are in tune with our bodies and can be taken regularly without causing adverse reactions.

KWAI is the ideal way to take advantage of the benefits of garlic, that have been appreciated for centuries, without the obvious social drawbacks.

## No odour

Kwai Highly Concentrated Garlic Tablets overcome the odour disadvantage of eating fresh garlic. The tablets are coated. This encloses and protects the contents until they are swallowed and digested by the body. It ensures that the tablets are tasteless and odourless, and easy to swallow, yet providing the original constituents of raw garlic.

# Kwai's special form of garlic

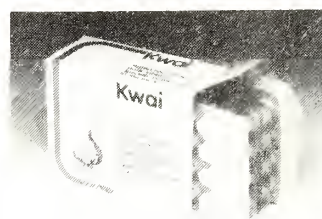
When fresh garlic is cut or crushed, an enzyme reaction occurs which produces the important strong smelling substance allicin. The allicin producing potential of fresh garlic is generally regarded as a test of its quality. So the greater the amount of allicin produced, the better the garlic.

Most garlic products provide only garlic oil — which represents just 0.1%-0.2% of the whole garlic clove and none of the other constituents. Moreover, the steam distillation extraction process by which garlic oil is normally extracted effectively 'boils' the garlic and degrades some of its natural constituents especially the allicin. That is why garlic oil contains little or no allicin or allicin producing potential.

KWAI uses the highest quality organically grown Chinese garlic bulbs, always from the same province and providing a rich allicin yield. The fresh garlic

cloves are gently dried and concentrated in a special process and then made into tablets, retaining the original constituents (apart from the water removed in drying). It is therefore the nearest thing possible to eating raw fresh garlic.

Only 6 tablets are equivalent to one whole garlic clove and in this way the equivalent benefit of a regular intake of fresh garlic is available in a convenient, tasteless and odourless form.



**Kwai Highly Concentrated Garlic Tablets. The spice of life!**

Available from chemists and health food shops throughout Great Britain



# Questions & Answers

*I heard of an operation using lasers. How can lasers be used in surgery? Isn't a laser a beam of light?*

Yes, you are right. A laser is a concentrated beam of light of one wavelength. In surgery a laser is used like a miniature blow torch. It can be precisely focused on malignant or cancerous cells in a growth and burn these without touching the healthy cells around them. A laser can also cut tissue with less bleeding than a scalpel as its heat immediately seals the edges of the cut. Lasers are also being used in delicate eye surgery.

*One of the children playing in our street got hit on the nose with a ball and his nose started bleeding. All my neighbours had different remedies and suggestions. What is the best way to stop a nose bleed?*

Seat the person down with the head held forward. Ask him or her to pinch the soft part of the nose, and meanwhile breathe through the mouth. After 10 minutes the nose should be released. If the bleeding continues pinch the nose again for a further 10 minutes. The head should be kept low. If after 30 minutes the bleeding is still continuing, you should take the person to the doctor.

*What are blood groups and why is it important that I should know mine?*

Blood grouping is a way of classifying different blood types. There are four groups called A, B, O and AB. Most people belong to the A and O groups. If you have an accident and need a blood transfusion, blood from your group or from the O group should be used as your own blood will react with other types. The exception to this is the AB group and you are lucky if this is yours. AB blood types accept all other groups. That is why you should know your blood group.

*We keep being told to eat more fibre. What does it do?*

Dietary fibre or roughage, being indigestible, is not absorbed from the guts or bowel and this gives bulk to the remains of our food. This bulky mass stimulates movement of the large bowel. It also absorbs water thus helping to form soft bulky stools which are easily passed through the intestine. This means that we function normally and such complications as constipation and other bowel disorders are prevented.

*I have heard that coils are not suitable for young women. Why is this?*

The coil is a small plastic and copper device which is inserted into the womb by a doctor and prevents you getting pregnant. As a rule it is not recommended for young women who have not had children, because the presence of a coil increases the chances of an infection in the pelvic area. If such an infection is severe and slow to respond to treatment, it can reduce your fertility, which can be a serious matter if you have not started a family but will want to later on. In addition the chances of getting pelvic infection are greater the younger you are (particularly if you have more than one sexual partner). So although some young women do use the coil successfully, many doctors recommend other methods should be tried first.

*Are the risks of smoking as great for women as they are for men?*

Yes. Women who smoke are as liable to develop heart disease, lung cancer and bronchitis as men. Mothers who do so are more likely to have a still birth; their children's development might be affected right up to the age of 11. Decreased fertility may also occur in women who smoke.

*My daughter was badly bitten by mosquitoes on holiday. Is there any possibility she will catch AIDS?*

There is no evidence that AIDS is passed on by blood sucking insects like mosquitoes, head lice, fleas, midges or ticks.

*What do "diagnosing" and "prognosis" mean? Doctors were using these words in a television debate.*

A doctor "diagnoses" or decides what your illness is by considering the symptoms. Prognosis is the medical word for what the likely outcome of your illness will be. For example, the diagnosis could be that you have 'flu and the prognosis could be that you will recover in about two weeks time with no after effects.

**?** Can you suggest a new question for the National Pharmaceutical Association to answer in its Provincial Press series? If you have a poser, perhaps one that your pharmacist routinely faces, and the NPA chooses to answer it through the media, *C&D* will pay you £25. Questions, please, to the Editor, marked "NPA Q&A", *Over The Counter*, Chemist & Druggist, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

## Coming next month

### Focus on...Athlete's foot

Jeremy Clitherow points out that this condition is not simply a sportsman's problem

### OTC Products List

Covers athlete's foot and other foot problems, and looks at baby care — colic, teething, nappy rash and cradle cap.

### Trying for that special look?

Our Beauty Basics feature this month is a step-by-step guide to basic make-up products and techniques.

### ...plus

Factfiles, competitions, Questions and Answers from the National Pharmaceutical Association, and lots more

**Make a date with issue 2 of *Over the Counter* in the January 28 edition of *Chemist & Druggist***



# On the other Side



**Vera**

...comes in at least every other day  
 ...hardly ever buys anything, and always complains about the price if she does  
 ...has prescriptions for drugs in quantities that would fill a wholesaler's van  
 ...always complains that the time before last the pharmacist only gave her 99 tablets instead of 100, but fails to say that last time, following a similar complaint, he deliberately gave her 101  
 ...comes complete with large shopping bag just too wide for the aisles in the shop  
 ...has had every disease known to man (or if not personally, knows someone who has)  
 ...always has to rush off, but stays in the shop for at least half an hour  
 ...has a favourite assistant who is always on her tea break when she calls

...thinks the doctor is "a nice young man" who is never wrong  
 ...always makes unfavourable comparisons with old Mr Brown who ran the pharmacy just after the war and "made all his own prescriptions up"  
 ...doesn't see the point of computers  
 ...tips her money on the counter (and the floor) and asks you to "take what you want dear"

## Letters

One does not like to criticise, but standards of efficiency and cost-effectiveness in some shops leave a lot to be desired. To be frank, many community pharmacies are among the worst offenders.

On a recent walk-about, I found two such premises wasting valuable selling space with counters. Worse still, one had three chairs occupied by elderly people who clearly had no intention of adding to the shop's turnover while waiting for prescriptions. This is *not* private enterprise at its best!

The above wasted opportunity has been put to management consultants who have recommended putting all stock onto gondolas and investing in motorised wheelchairs so that the elderly and infirm may tour the store while waiting, thus making their own invaluable contribution to the market economy.

Naturally, any profits resulting from this initiative would need to be deducted from NHS remuneration.

**M. Thatcher**  
 Dulwich

It has been drawn to my attention that some pharmacies are still using pre-1955 electronic tablet counters in their dispensaries. While I am

sure these historic devices still earn their keep, I wish to warn that recent tests have demonstrated that some harbour residual colonies of *Salmonella clarket* — a particular virulent strain.

Royal Pharmaceutical Society inspectors have been asked to take swabs in suspect cases, but I would urge all owners to suspend use immediately. Where reversion to manual counting is inevitable, please ensure full aseptic precautions are observed.

Any redundant machines which cannot be disposed of through Southeby's will be disinfected and offered to Russia.

**E. Currie**  
 Derbyshire

There is, of course, just a chance we might have made these letters up. But we are interested in *your* views . . . How do you see the future role of pharmacy assistants? Have you any helpful tips to pass on to other assistants on merchandising or window display? What would you like us to cover in this, your magazine? You might have an amusing tale to relate of an incident in the pharmacy, or can describe a typical customer we could illustrate for our "On the other side" spot. Write to Over the Counter, Chemist & Druggist, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

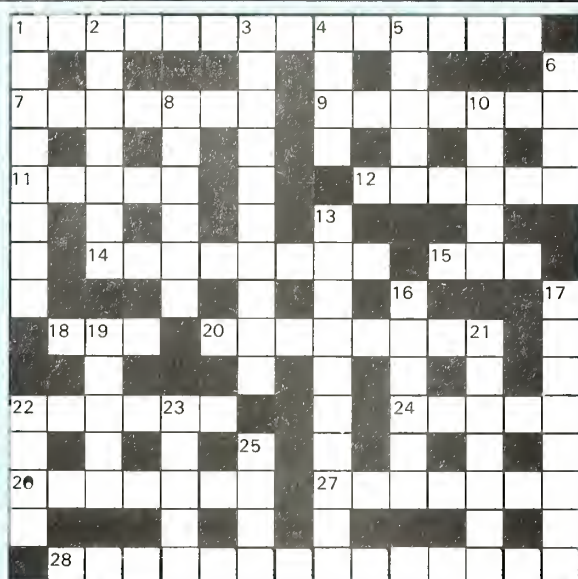
## Keep Taking the Tablets

by Mollusc.





# Crossword



**£100 to be won**

**No1**

**The four readers submitting the first correct entries opened after the closing date will each win £25**

Entrants must be assistants employed in a registered pharmacy for a minimum of 6 hours in a normal week. Only one entry is allowed from any one person. The solution will appear in the next issue of *Over the Counter*. The names of the winners will be published in two months time.

Name.....

Pharmacy.....

Address.....

## ACROSS

- 1 The chemist business, or one fifth of the RPSGB (14)
- 7 Men can't help acting on it... (7)
- 9 Nasal spray from those Anadin people (7)
- 11 Brand leading, once unmentionable, now TV advertised (5)
- 12 Cosmetic houses choice customers get one (6)
- 14 Spotting...opposite of 5 down? (8)
- 15 Buddhism for motorcycle mechanics (3)
- 18 Ovoid home for Salmonella? (3)
- 20 A newcomer to any job needs this, NPA provides it for assistants (8)
- 22 Ex-Minister who cracked one yoke too many (6)
- 24 Baby seat for baby seats (5)
- 26 Decide at New Year...the cure for too much Christmas spirit? (7)
- 27 Smith & Nephew aid for contact lens wearers (7)
- 28 New from us to you (4,3,7)

## DOWN

- 1 Heady brew for parasites (8)
- 2 12s and 24s GSL, but 48s are P (7)
- 3 That'll do nicely at around 2 per cent a month (6,4)
- 4 Open. Could be a party in Geneva for international organisation (4)
- 5 Piece of cake (5)
- 6 Not much (4)
- 8 Looseness incorporating black cab between Liverpool and York initially (6)
- 10 Uptight, could be headache, could be muscles (5)
- 13 Mixed up Pict in seat makes cleaning agent (10)
- 16 Sounds easy enough for babies (6)
- 17 Round again for rubbish user (8)
- 19 Young ladies (5)
- 21 Buy some dentures (3,1,3)
- 22 Successful medicine (4)
- 23 Much worse, but badly ungrammatical (5)
- 25 Aspirant with a certificate produces a shortened college (4)

**Closing date for entries: Monday, January 23,**

**Send completed crosswords to: Crossword No1, *Over the Counter*, Chemist & Druggist, Benn House, Sovereign Way, Tonbridge TN9 1RW.**



## What's she saying?

**Caption competition No 1**

**£25 to be won by the reader submitting the most apt caption for the photograph of ex-Minister Edwina Currie, seen here testing a revolutionary square crumpet**

### Rules

1. Entry into the competition will be deemed to imply acceptance of the rules.
2. Entrants must be assistants employed in a registered pharmacy for a minimum of 6 hours in a normal week. Only one entry is allowed from any one person.
3. The winning entry will be the caption judged to be the most apt and amusing to fit the published photograph.
4. The judges decision is final and no correspondence will be entered into.
5. Copyright in the winning entry is assigned to Benn Publications Ltd.
6. The winning caption will be published in the March issue of *Over the Counter*.

**Closing date for entries: Monday, January 23, 1989.**

**Send your caption to: Caption Competition No1, *Over the Counter*, Chemist & Druggist, Benn House, Sovereign Way, Tonbridge TN9 1RW.**



# THE BRAND NEW ROBITUSSIN SALES PACKAGE FOR 1989

For the full story please tick the appropriate boxes

Dramatic new packaging

☐

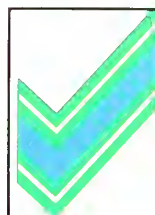

Strong effective design across the range

New TV commercial

☐


Watch out for our new 30" and 10" TV commercials

Heavyweight national advertising

☐


**£1.5m** national TV campaign from Dec 88 to Mar 89

One of the fastest growing brands in the UK

☐


82% growth last winter and still growing



(We've taken the liberty of ticking the boxes for you)

But it's a great story, isn't it!

**Robitussin**  
No drowsiness – Sugar free



# It took £250,000 to get this man to talk about **NEW** **Dequacets**



New Dequacets is a brand new lozenge from Evans which not only soothes a sore throat, but contains menthol to unblock nasal congestion.

Supported by a substantial promotional spend, the 'Dequa Man' will be appearing on poster sites all over the U.K. this winter – persuading the public to ask for the Dequa range by name.

Order the Dequa range now through your local wholesaler or Evans representative.



**EVANS** *Keeping ahead  
of the competition*